United Nations E/ICEF/2000/P/L.43

Economic and Social Council

Distr.: Limited
13 July 2000

Original: English

For action

United Nations Children's Fund
Executive Board
Second regular session 2000
18-20 September 2000
Item 3 of the provisional agenda*

Recommendation for funding for a short-duration country programme**

Oman

Summary

The present document contains a recommendation for funding from regular resources and other resources for the country programme of Oman with a duration of three years to support activities that will lead to the preparation of a full-length country programme. The Executive Director *recommends* that the Executive Board approve the amount of $1,500,000 from regular resources, subject to the availability of funds, and $1,500,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2001 to 2003.

* E/ICEF/2000/14

** The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1999. They will be contained in the summary of recommendations for regular resources and other resources programmes (E/ICEF/2000/P/L.27).

00-54729 (E) 280800

Basic data

(1998 unless otherwise stated)

Child population (millions, under 18 years)	1.2
U5MR (per 1,000 live births)	18
IMR (per 1,000 live births)	15
Underweight (% moderate and severe) (1995)	23
Maternal mortality rate (per 100,000 live births)	19
Literacy (% male/female) (1996)	79/57
Primary school enrolment (% net, male/female) (1997)	86/86
Primary school children reaching grade 5 (%)	95
Access to safe water (%) (1993)	85
Routine EPI vaccines financed by Government (%)	100
GNP per capita (US$)	*
One-year-olds fully immunized against:	
Tuberculosis	96 per cent
Diphtheria/pertussis/tetanus	100 per cent
Measles	98 per cent
Poliomyelitis	100 per cent
Pregnant women immunized against tetanus	96 per cent

* Estimated range $3,031 to $9,360.

The situation of children and women

1. Oman is a large, sparsely populated country, with only seven persons per square kilometre. Over the last three decades, the country has made remarkable socio-economic progress as a result of sustained national commitment, the wise use of its oil income, and extensive use of expatriate expertise and labour. Expatriates account for 26 per cent of the country's population of 2.3 million, with a higher proportion employed in the social sectors. Therefore, human resource development to reduce high dependence on expatriates is a key national concern.

2. Oman has achieved most of the goals of the World Summit for Children, including significant reduction in infant mortality rates (IMR) and under-five mortality rates (U5MR), high immunization coverage, elimination of neonatal tetanus, a polio-free status since 1994, and high coverage in basic education. Other achievements include the wide expansion of the social service infrastructure and social security system. Over 90 per cent of births are attended in health facilities, and over 90 per cent of pregnant women have at least one antenatal check-up. Starting from a virtual zero base in 1970, the national education system has expanded to high levels of basic education coverage with virtually no gender gap.

3. These impressive gains tend to mask the needs and emerging challenges facing Oman's children and women, especially those linked to knowledge and behavioural changes. Tackling such issues is likely to be more complex and demanding than the largely service delivery efforts that have achieved many goals for children and women in the past. Malnutrition affects one quarter of children under five years of age and remains an overriding national concern. Child-care practices in the home are the main contributing factor, as shown by a 1999 Ministry of Health-UNICEF assessment. Pre-school services cover only some 8 per cent (1998) of this age group. Despite progress in reducing micronutrient deficiencies, one third of pregnant women and one fifth of children under five still suffer from iron-deficiency anaemia, some 39 per cent of breastfeeding mothers have vitamin A deficiency (1997), and an estimated 10 per cent of schoolchildren suffer from mild to moderate iodine deficiency disorders, including goitre. Congenital malformations and intra-uterine growth retardation were the two principal causes of death in 1998 among

children under five. Disability is a concern among those who survive: estimates of disabled children range up to 62,000, with 10 per cent of these severely disabled. A contributing factor may be the high rate of consanguineous marriages (54 per cent). Educational services and options for disabled children are very limited.

4. With continuing expansion of school services, questions regarding the quality and efficiency of education are coming to the fore, with the need being felt to improve teaching and pre-school programmes, and to involve parents to a greater extent. Monitoring Learning Achievement (MLA) studies conducted by the Government have consistently identified low achievement, and have noted differences between private and public, and urban and rural schools. In higher grades, school enrolment rates drop sharply; government statistics show that only two in five children of secondary school age complete school. To address these concerns, the Government launched a Basic Education Reform Programme in 1998.

5. Recent years have seen several advances for Omani women, including the right to vote and stand for elections, although ratification of the Convention on the Elimination of All Forms of Discrimination against Women is still under consideration. Oman's total fertility rate — previously among the highest in the region — has declined dramatically, from 7.8 to 4.8 from 1993 to 1998. This is attributed to girls staying in school longer and marrying at a later age, and to the implementation of a national birth-spacing programme. However, gender disparities, such as higher female adult illiteracy, lower access to information and decision-making, and lower economic and management levels, persist.

6. Young people offer a tremendous potential for the country's future progress, and the Government is keen to channel this potential into national development activities. Efforts to increase employment options for youth have been accelerated, and planning is under way to prevent emerging problems related to such lifestyle issues as smoking, drug addiction and vandalism. The incidence of HIV/AIDS is low, but noting the risk factors, the Government has stepped up awareness and counselling for youth.

7. The World Health Organization (WHO) is the only other United Nations agency with an in-country presence, although some United Nations agencies provide technical support through their regional offices in Beirut and Amman. There are no bilateral aid agencies or international non-governmental organizations (NGOs) operating in the country, but some embassies provide development assistance, mostly in the economic sector.

Programme cooperation, 1997-2000

8. Considerable progress was made towards achievement of national goals for children, with the UNICEF contribution comprising primarily technical support, advocacy and strategic use of studies and assessments. The health programme contributed to training and raising awareness of such priorities as birth-spacing, healthful lifestyles for youth, childhood disabilities, and consanguinity. An assessment of perinatal and neonatal mortality identified priorities for further reduction of IMR; drew attention to subnational disparities; and led to the issuance of the 1999 Civil Registration Decree and to a Ministry of Health survey to verify and analyse existing records. An assessment of services for disabled children highlighted the needs and required actions. The nutrition programme expanded community-based growth monitoring from one region in 1996 to seven in 1998, reaching 187 villages. Through this programme, UNICEF made crucial contributions to the community empowerment process, training over 2,500 women volunteers from Community Support Groups (CSGs), who now form a nationwide network for channelling other health and nutrition information. UNICEF-supported research led to positive national policies on micronutrients, which resulted in reduced levels of anaemia among pregnant women (from 49 to 37 per cent from 1996 to 1998); increased levels of iodized salt consumption (from 35 to 60 per cent from 1996 to 1998); and near-universal vitamin A supplementation for children and post-partum mothers. UNICEF support was also crucial in sustaining the Baby-Friendly Hospital Initiative and the Complementary Feeding Initiative in all public health facilities; and in the issuance of the Omani Code for Regulation of the Marketing of Breast Milk Substitutes.

9. The education programme provided critical technical assistance for basic education reform in terms of curriculum development and the implementation of the MLA initiative for grades 6 and 9. The Education

Management Information System (EMIS) was reinforced and introduced in 9 out of 10 regions. Support was also given to developing a curriculum guide for pre-school teachers and preparing the national Education for All 2000 report. UNICEF support led to follow-up at the national level of the Fourth World Conference on Women; the submission of the country's first report to the Committee on the Rights of the Child; and strengthened national capacity in social analysis and planning. Overall, UNICEF support contributed substantially to communication and training materials used in social sector programmes.

Lessons learned from past cooperation

10. Lack of a clear distinction between national goals and the goals and objectives of the UNICEF programme of cooperation put an undue burden of responsibility on the country programme. A number of overly ambitious objectives had been set with regard to behaviour change and knowledge acquisition, in some cases without consideration of baselines and data on knowledge, attitudes and practices (KAP). This constrained both the measurement of results that could be attributed to UNICEF cooperation and the design of effective communication strategies. Experience also showed that UNICEF had taken on too many activities, which exerted tremendous pressure on the office. The programme will therefore need to focus on areas where it can have the greatest impact, such as in developing guidelines and models for wider-scale replication by the Government.

11. Overall, past programme experience has confirmed the Government of Oman's commitment to national development and children, and its willingness to tackle any social or human issue, given concrete evidence of the need. This augurs well for the new form of cooperation, which will require increased in-country resource mobilization to compensate for the gradual phasing out of UNICEF regular resources. Key constraints for the new form of cooperation include the sectoral approach of implementing partners, the weakness of the non-governmental sector, and the private sector's weak involvement in the social sectors.

Country programme preparation process

12. In line with Executive Board decision 1997/18 – modified system for allocation of general resources for programmes (E/ICEF/1997/12/Rev.1) — for countries reaching a combined threshold of $2,895 in gross national product (GNP) per capita and U5MR of less than 30 per 1,000 live births, UNICEF regular resources will gradually be phased out in Oman, beginning with the 2001-2003 country programme. Planning for this new approach started after the mid-term review, with the reduction of UNICEF staff, and dialogue with the Government on the possibilities for increased resource mobilization within the country. The new programme has been developed through a series of strategy meetings with national partners at central and subnational levels, and supported by consultations with the regional office. Regular interaction has been maintained between UNICEF and WHO on issues of common concern.

Country programme goals and objectives

13. The country programme aims to sustain past gains and keep children's and women's concerns high on the national agenda. The proposed programme will support the optimum realization of the principles of the Convention on the Rights of the Child for all Omani children, focusing on the goals that remain to be achieved in the areas of early childhood care, nutrition, education quality, youth and gender, and disabled children.

Relation to national and international priorities

14. The programme preparation benefited from a linkage with the concurrent Government planning exercise to formulate the next National Five-Year Development Plan, and from consultations with visiting experts of other United Nations agencies.

Recommended programme cooperation, 2001-2003

Estimated annual expenditure

(In thousands of United States dollars)

	2001	2002	2003	Total
Regular resources				
Trends monitoring	60	50	70	180
National policy and programme development	185	122	70	377
Nutrition and early childhood care	200	170	140	510
Partnerships and communication	90	80	50	220
Cross-sectoral costs	65	68	70	203
Subtotal	**600**	**500**	**400**	**1 500**
Other resources				
Trends monitoring	50	50	70	170
National policy and programme development	100	175	240	515
Nutrition and early childhood care	75	175	240	490
Partnerships and communication	75	100	150	325
Subtotal	**300**	**500**	**700**	**1 500**
Total	**900**	**1 000**	**1 100**	**3 000**

Programme strategy

15. Overall, strong emphasis will be put on support to national human resource development. The future role of UNICEF in the country will be a catalytic one, steering away from service delivery and focusing more on advocacy, provision of selective high-quality technical inputs, and monitoring the situation of children and women. The country programme will comprise four programmes: the first two will provide support in health, education and protection to national institutions, programmes and policies, through capacity-building, technical support and advocacy based on data, studies and evaluations; the third will aim to reduce protein energy malnutrition and improve early childhood care through empowerment and capacity-building strategies that demonstrate the value of community-based approaches, and through the use of such models to influence policies and programmes at national level; and the fourth will provide advocacy and communication support.

16. The *trends monitoring programme* aims to develop effective systems for monitoring the situation of children and women, as well as the implementation of the Convention on the Rights of the Child in Oman. Sectoral ministries currently have data on different sets of indicators, but no institution has a regularly updated, comprehensive information database on children. The "Omani Child Database" project thus aims to establish an intersectoral database on Omani children and women. UNICEF technical support will help to assess the data situation, develop a harmonized list of indicators linked to the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against women, strengthen institutional mechanisms, and support studies and research, especially on emerging issues. An annual "State of the Omani Child" report will serve as the main monitoring and advocacy tool. The second project in this programme will assist the Government in reporting on the implementation of the Convention on the Rights of the Child, through technical assistance to the National Committee for Child Rights and the

review and design of legal provisions for children. If the Convention on the Elimination of All Forms of Discrimination against Women is ratified, the project will be extended to provide support to its follow-up.

17. *National policy and programme development* will support the formulation and implementation of national policies and plans in health, education and protection, mainly through technical inputs and policy dialogue grounded in knowledge and research. It comprises three projects.

18. The health project will aim to ensure the quality of services required to sustain achievements in the health sector through identifying subnational disparities and highlighting emerging issues that need government action; supporting research and information dissemination, including on new technologies; providing technical inputs to national planning processes, including the development of guidelines for subnational primary health care committees; and monitoring the quality of immunization services over the next few years, in view of the increasing influx of young Omani nationals in health facilities.

19. The quality education project will strengthen the elements that lead to key improvements in primary schools. Technical expertise will be provided to the following: periodic assessment of the MLA and EMIS initiatives at the subnational level; training of teachers in the application of Oman's new national curriculum and student-centred teaching and learning techniques; and development of health education components in primary school curriculum and teacher training modules. In selected regions, UNICEF will assist training and orientation of newly established parent-teacher associations. Such interventions will be documented and used to develop guidelines for a more systematic and nationwide approach to parental involvement and classroom interaction.

20. The child protection project aims to promote better services for children needing special attention. This will be done through: supporting baseline surveys and the development of a comprehensive policy on disabled children; training master trainers in screening for disability at health facilities; upgrading the skills of volunteers who run community-based rehabilitation centres for disabled children; and promoting the mainstreaming of physically disabled children into schools, including a review of issues such as physical access, teacher orientation and training.

21. The *nutrition and early childhood care programme* will contribute to the national goals of reducing malnutrition by half among children under three years of age, eliminating iodine deficiency disorders and vitamin A deficiencies, and reducing iron deficiency anaemia from 37 to 30 per cent by the year 2003. The findings of nutrition-related studies currently under way will define the geographic scope of the project. The project on reduction of malnutrition will promote the application of community, school and family-based approaches in tackling child malnutrition. This will be done through documentation of successful community-based nutrition experiences; surveys to obtain data on KAP, dietary intake of households, and the nutritional status of children in selected regions and communities; and the use of survey findings to strengthen advocacy and plan interventions selectively through CSGs and other participatory approaches. The micronutrients project will monitor the Government's ongoing flour fortification and salt iodization initiatives, and support communication activities to increase public demand for iodized salt. UNICEF will participate in regional advocacy efforts with relevant organizations and producers in neighbouring countries to address the issue of importation of non-iodized salt.

22. The project on early childhood care for survival, growth and development aims to enhance options for infant and young child care and stimulation. The project will support the training of pre-school teachers in the application of the 1998 pre-school curriculum jointly produced by the Ministry of Education and UNICEF; the development of guidelines and standard child-care principles for community pre-schools; the incorporation of better parenting concepts into relevant government training programmes; and the design of nationwide media messages on better parenting, addressed to both men and women.

23. The *partnerships and communication programme* comprises three projects. The first, promoting child rights and gender issues, will use data obtained from the trends monitoring programme to promote the implementation of the Convention on the Rights of the Child; support training and orientation on the principles of the Convention on the Elimination of All Forms of Discrimination against Women and their application; and assist the Omani Women's Associations to better manage women- and child-

focused initiatives. The second, the youth project, will aim to expand access to information and learning options for post-primary-school-age children and youth, and to harness their potential for community participatory activities. This will be done through providing life skills orientation for youth that encourage positive attitudes related to work ethics, civic awareness, gender relations and responsible adulthood; and through developing a comprehensive national framework for the participation of youth, including disabled youth, in the national development process. Priorities will be determined through research and dialogue with youth in seminars and participatory forums. The third project, capacity-building for communication, aims to build national institutional capacity in communication skills for behaviour change in key areas, through supporting the training of media professionals in communication approaches, organizing communication planning and coordination workshops, and facilitating information and experience exchanges with other countries in the region.

Monitoring and evaluation

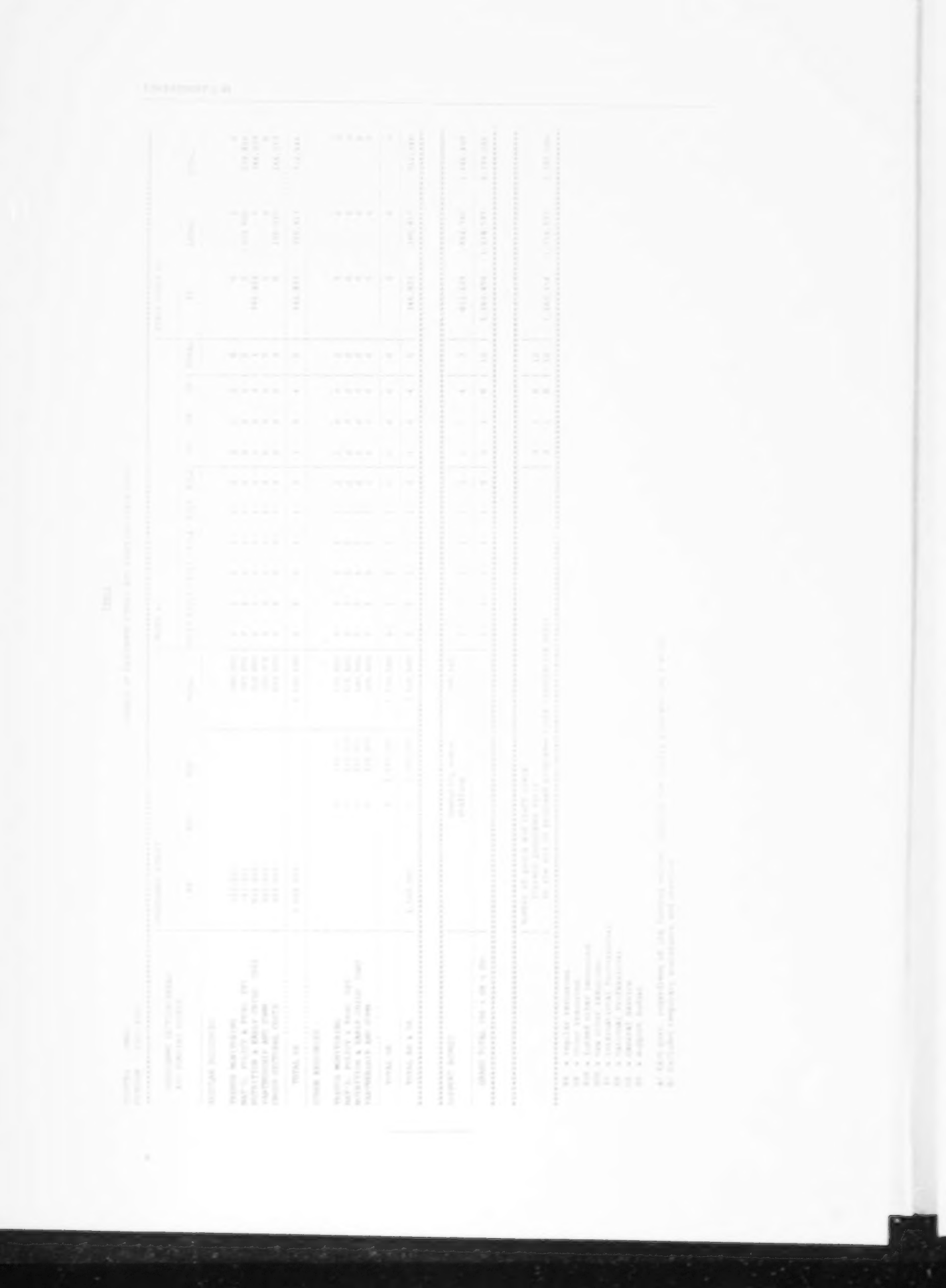
24. Monitoring and evaluation are pivotal elements in the success of the country programme. To effectively coordinate the many surveys, studies and evaluations that are part of the programme design, an integrated monitoring and evaluation plan will be developed and implemented, with updates to the plan each year following the annual reviews. Oman is a relatively data-rich country: baseline data already exist on several key indicators for children. Other indicators, such as those on behaviour and attitudes and those for measuring community-based initiatives, will be further developed and monitored.

Collaboration with partners

25. The Ministry of Social Affairs, Labour and Vocational Training, Ministry of Health, Ministry of Education, Ministry of National Economy, Ministry of Information, Ministry of Justice and other relevant ministries will be key partners in the pursuit of the objectives of the programme of cooperation. The General Organization of Youth, Sports and Cultural Affairs, the National Organization of Scouts and Guides, the Omani Women's Associations and community-based groups such as CSGs and volunteers running community-based rehabilitation centres will play an important role in programme implementation.

Programme management

26. The strength of the technical capacity of the UNICEF office will be a critical factor in the leverage of government and private sector resources for the programme, which in turn will determine the final scope, mix and phasing of programme activities. After staff cuts in 1999, the programme team now comprises three professionals, including the representative. This is the minimum needed for the programme to function effectively. Additional expertise for high-level technical inputs, which are an integral part of achieving programme success, will be provided through recognized experts from regional and international centres of excellence and other United Nations agencies. Support from regular resources to Oman will be gradually reduced, in accordance with Executive Board decision 1997/18. Dialogue is under way and possibilities are being explored for the evolution of a new style of partnership, where the decline in regular resources will be compensated by: (a) government funds in the form of higher levels of cost-sharing of selected programme components; (b) secondment of government staff to the UNICEF office; and (c) private sector fund-raising.



United Nations E/ICEF/2000/P/L.23

Economic and Social Council

Distr.: Limited
10 July 2000

Original: English

For action

United Nations Children's Fund
Executive Board
Second regular session 2000
18-20 September 2000
Item 3 of the provisional agenda*

Recommendation for funding for a short-duration country programme**

Syrian Arab Republic

Summary

The present document contains a recommendation for funding from regular resources and other resources for the country programme of the Syrian Arab Republic with a duration of one year to support activities that will lead to the preparation of a full-length country programme. The Executive Director recommends that the Executive Board approve the amount of $926,000 from regular resources, subject to the availability of funds, and $290,000 in other resources, subject to the availability of specific-purpose contributions, for the year 2001.

* E/ICEF/2000/14

** The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1999. They will be contained in the summary of recommendations for regular resources and other resources programmes (E/ICEF/2000/P/L.27).

00-54658 (E) 260700

Basic data

(1998 unless otherwise stated)

Child population (millions, under 18 years)	7.7
U5MR (per 1,000 live births)	32
IMR (per 1,000 live births)	26
Underweight (% moderate and severe) (1995)	13
Maternal mortality rate (per 100,000 live births) (1981)	110
Literacy (% male/female) (1995)	85/54
Primary school enrolment/attendance (% net, male/female) (1996)	95/87, 98/95
Primary school children reaching grade 5 (%) (1995)	94
Access to safe water (%) (1996)	86
Routine EPI vaccines financed by Government (%)	100
GNP per capita (US$)	1 020
One-year-olds fully immunized against:	
tuberculosis	75 per cent
diphtheria/pertussis/tetanus	97 per cent
measles	97 per cent
poliomyelitis	97 per cent
Pregnant women immunized against tetanus	53 per cent

The situation of children and women

1. Over the past decade, the Syrian Arab Republic has achieved considerable progress in social development. The infant mortality rate (IMR) and under-five mortality rate (U5MR), estimated in 1990 at 34 and 42 respectively, had declined to 26 and 32 per 1,000 live births in 1998. With high immunization coverage rates, the country is certified as polio-free: no polio cases have been reported since 1995. Primary education is compulsory, and the 1996 multiple indicator cluster survey (MICS) reported high primary school net enrolment rates (95 and 98 per cent respectively for girls and boys). Yet the maternal mortality rate remains higher than in some other countries of the region.

2. Despite advances, progress has been uneven, and geographic disparities persist. The rural north and north-east (five governorates that account for almost half the country's population of 15.3 million) lag in a number of social indicators. A 1996 Ministry of Health study found that U5MR was one third higher in rural areas than in urban areas. The 1996 MICS showed that in the north and north-east governorates, up to 19 per cent of children were underweight and 26 per cent were stunted, in contrast to 13 and 21 per cent nationwide. The region has less than one quarter of government health centres. Access to health services is about half that of other governorates, and in rural areas it is two thirds that of urban areas. The country's recent economic difficulties and drought have also had a disproportionate impact on rural groups living in these governorates.

3. Government sources show that the major causes of infant and child mortality in 1996 were premature birth, obstetric conditions, congenital malformations (often linked to consanguinity and administration of drugs during pregnancy), septicaemia, diarrhoeal disease and acute respiratory infections. Such findings highlight the need for improved maternal and child health services and better home care. Data are scarce on adolescent health issues, including HIV/AIDS.

4. The quality of health services in the Syrian Arab Republic remains a concern. A 1995 study by the Ministry of Health and World Health Organization (WHO) on the country's health centres found that the quality and range of services were limited, more so for

maternal health. Ministry data show that only 67 per cent of births are attended by trained health personnel. Challenges also remain in improving home-care practices and the early childhood environment. The 1996 MICS showed that only 17 per cent of mothers in the north treated their children's diarrhoea correctly with oral rehydration therapy. Despite the implementation of a national salt iodization programme since 1993 to combat high goitre rates in children, a 1997 survey found only 40 per cent of households consumed iodized salt.

5. Primary school drop-out rates are higher among girls in the north and north-east. In 1997, for example, drop-out rates were 53 per cent for girls and 17 per cent for boys in Al Qusra district, in the north-eastern governorate of Deir Ezzour. Other challenges facing the education system are the quality and relevance of primary schooling. Classroom teaching is geared towards learning by rote, and the curriculum is not oriented towards the knowledge and skills needed in daily life. Many primary schools lack learning materials and textbooks.

6. A 1998 national survey found that 0.3 per cent of children under 12, 7 per cent of children between the ages of 12 and 14, and 19 per cent of children between the ages of 15 and 17 were employed as workers. Children accused of crimes can spend a year or more in detention, often in contact with adult criminals, before being brought to trial. To date, scant attention has been paid to addressing the underlying social factors that lead children to conflict with the law, and linkages between judicial, law enforcement and social structures are weak. Recognizing this, the Government has initiated a reform of the juvenile justice system. It has also committed itself to reviewing national legislation vis-à-vis the Convention on the Rights of the Child and to improving the monitoring of the implementation of the Convention through a "High Committee" appointed for this purpose. The United Nations Development Assistance Framework (UNDAF) process has begun in the Syrian Arab Republic and a Common Country Assessment (CCA) was completed in 1999.

Programme cooperation, 1996-2000

7. In the area of health, WHO and UNICEF support contributed to the certification of the Syrian Arab Republic as a polio-free country. Overall, however, not enough attention was paid to verticality and poor quality within the health services, nor to preventive and home-care aspects of child health. The adoption in 1999 by the Ministry of Health of the WHO/UNICEF-supported Integrated Management of Childhood Illness (IMCI) initiative was a step in the right direction. Some 200 awareness seminars on HIV/AIDS were held for youth and health workers.

8. In education, UNICEF advocacy led to official recognition of the problem of girl drop-outs as a priority concern. Support to the Ministry of Education in improving the quality of basic education through the Global Education Initiative prompted its adoption for implementation in all of the country's 12,000 primary schools over the coming 10 years. Not all UNICEF-assisted interventions were as positive: the project for vocational training of girls and women did not address the more basic problem of drop-outs and covered only a limited number of girls.

9. The high-risk areas programme played a key role in improving health and social conditions in targeted rural and peri-urban communities and in influencing national development policies through its pilot activities. For example, from 1996 to 1998, immunization coverage and school enrolment rates improved in some 40 villages. The programme's school health activities prompted development of a national plan for implementing such activities in all primary schools nationwide. An initiative for encouraging girl drop-outs to resume their schooling prompted the Ministry of Education to pilot a "second chance" learning project in the northern governorates. Young women and adolescent girls have been mobilized to play the main role in establishing village health information systems, thus encouraging the Ministry to initiate such systems in selected districts to improve utilization of health services.

10. In the area of child protection, UNICEF information-based advocacy has proven successful. UNICEF-supported studies on juvenile justice, child disability, early marriage and child labour played a key role in generating policy discussion and initiating concrete action by the Government, such as the review

of Syrian legislation, a national conference on juvenile justice, and training for all stakeholders to improve the administration of juvenile justice. In 1997, Dourade Lahham, a renowned Syrian artist, was designated as spokesman for Syrian children's rights. He has become a valuable advocate, and in 1999 was appointed Goodwill Ambassador for the entire region.

Lessons learned from past cooperation

11. Advocacy could have been more effective had the impact of UNICEF interventions been measured more systematically. Therefore, monitoring and evaluation of the programme need to be strengthened. Other weaknesses include overly ambitious planning, too many dispersed activities, and verticality of interventions. With its limited resources, the programmme of cooperation will need to focus on fewer interventions.

Country programme preparation process

12. The new programme strategy was prepared in 1999 in close collaboration with government representatives. Other United nations agencies, non-governmental organizations (NGOs) and the regional office were also involved in the process, and consultations were held with donor embassies. The formal strategy meeting was followed by a series of informal bilateral meetings between UNICEF and its direct counterparts in the Government, where the programme was further developed. At the first regular session of 2000, the UNICEF Executive Board reviewed the country note for the 2001-2005 programme of cooperation (E/ICEF/2000/P/L.18). Subsequently, a major cabinet reshuffle prompted the Minister of Planning to request, through the United Nations Resident Coordinator, that the United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA) and UNICEF extend their current programme cycle by one year. The new cycle would begin in 2002 to allow sufficient time for the preparation of a new framework of cooperation between the Government and United Nations agencies, which would incorporate the country's new economic and social reforms. This would also allow the three agencies to maintain a harmonized cycle.

Country programme goals and objectives

13. The one-year programme will continue to support national and local authorities, communities and families in fulfilling their responsibilities to children and women, as defined by the Convention on the Rights of the Child. *Within the framework of the* UNDAF, the programme will contribute to broader national efforts to reduce geographical disparities in major social indicators; introduce reforms designed to improve the quality and responsiveness of health and education services; and create and sustain public and political concern for children's and women's rights.

Relation to national and international priorities

14. As noted above, the Government, which is in the process of preparing its ninth Five-Year National Plan, gives high priority to increasing basic infrastructure and to promoting the quality of education and health services.

Programme strategy

15. The country note explained why the structures and strategies proposed for the 2001-2005 programme are suited to the present-day situation in the country. This one-year programme will be essentially the same as that proposed in the country note, and many elements will continue into the next cycle, which begins in 2002. Targets of individual projects have been adjusted to fit the one-year duration. Through advocacy and capacity-building, efforts to support new initiatives will focus mostly on laying a foundation for the next cycle. The programme will continue to make selective inputs at the national level, in areas where policy changes and government action can lead to critical improvements in the situation of children and contribute to granting their rights. To this end, UNICEF will continue its support to pilot projects and action-oriented studies which, linked to advocacy, have proven successful in promoting children's rights and policy and legislative changes. Because of limited resources, the identification and choice of these interventions will be critical. Most UNICEF-supported interventions will focus on the north and north-east

Recommended programme cooperation, 2001

Estimated annual expenditure

(In thousands of United States dollars)

	Total
Regular resources	
Support to national policy and programme development	209 832
Disparity reduction	314 832
Promotion of children's and women's rights	171 832
Cross-sectoral costs	229 504
Subtotal	**926 000**
Other resources	
Support to national policy and programme development	90 000
Disparity reduction	140 000
Promotion of children's and women's rights	60 000
Subtotal	**290 000**
Total	**1 216 000**

regions of the country. A more integrated programming approach will be adopted, in recognition of the interrelation of children's and women's rights. Through intersectoral working committees and policy seminars, UNICEF will continue mobilizing partnerships and alliances, including with Syrian civil society, other United Nations agencies and NGOs.

16. *Support to national policy and programme development* will, through capacity-building and advocacy based on the experiences of the disparity reduction programme, contribute to government efforts to sustain and extend achievements in the health and education sectors, and to reach the remaining goals of the World Summit for Children.

17. The health project will contribute to the introduction of policies designed to improve the quality of maternal and child health. Through training and technical support, UNICEF will contribute to national policies and strategies in the areas of the IMCI, women's and adolescent health, HIV/AIDS, nutrition, the use of iodized salt, and health communication. UNICEF will continue to advocate and support the implementation of "baby-friendly" policies in the country's maternity facilities.

18. The global education project will contribute to improving the quality and relevance of primary schooling, so that the primary school system is more effective in imparting the literacy, numeracy, critical-thinking and life skills needed by young people today in the Syrian Arab Republic. Specific areas of support will include teacher training and training materials development. UNICEF will also advocate for the mainstreaming of global education approaches in the school system.

19. The *disparity reduction programme* will target a few disadvantaged communities in the five north and north-east governorates, building on the successes of the high-risk areas programme during the 1996-2000 period. Such a focus will help address disparities and promote community empowerment. Through a combination of local capacity-building, community mobilization and targeted service delivery, the programme will contribute to improving the coverage of health and education services in selected communities within the targeted governorates (Idleb, Aleppo, Raqqa, Deir Ezzor and Al Hassakah).

20. The integrated child care and development project will support the creation of "child-friendly"

communities in targeted areas, where young children enjoy a physical environment, basic services and facilities conducive to their survival, growth and development. The project will emphasize improving child-rearing knowledge and skills among families and strengthening community partnerships with government extension services and institutions providing basic social services. To this end, UNICEF will support the training, mobilization and social organization of local government and key community members, and the training and mobilization of parents and community and women's groups.

21. The back-to-school project will help address the major factors leading children, and particularly girls, to drop out and stay out of school in the targeted areas. Support will be extended to the development and implementation of multi-channel information, education and communication (IEC) activities aimed at reaching families in targeted areas, and to advocacy for policies facilitating the re-integration of drop-outs into the formal school system. Building on a successful pilot initiative begun in 1998 in Idleb governorate in cooperation with the Ministry of Culture, UNICEF will continue cooperating with the Ministry of Culture and the Ministry of Education to provide basic education and life skills education courses for out-of-school girls between the ages of 13 and 19 in targeted areas.

22. The *promotion of children's and women's rights programme* will contribute to ensuring that these rights remain at the fore of the public and political agenda, and that they are fully incorporated into national plans and policies. The advocacy and communication project will contribute to raising awareness and concern for children's and women's rights at all levels of society. UNICEF cooperation will focus on developing targeted IEC activities; supporting broad-based media activities on themes related to the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women; and supporting activities involving the regional UNICEF goodwill ambassador. Efforts will also involve the private sector as a partner in promoting the Convention on the Rights of the Child.

23. The monitoring and planning project will contribute to strengthening national capacity to monitor and follow up on the implementation of the Convention on the Rights of the Child. UNICEF will support the Central Bureau of Statistics and concerned ministries in conducting and applying policy-oriented research aimed at improving baseline data and highlighting key outstanding child rights concerns. Improving the availability and quality of disaggregated data will be a particular emphasis of research efforts.

24. The children with special needs project will contribute to the development of legislation, policies and programmes for the care and protection of these children, using the norms in the Convention on the Rights of the Child. Building on efforts begun during the 1996-2000 programme period, UNICEF cooperation will focus on addressing three specific groups: children in conflict with the law, working children, and children with disabilities. Specific areas for support and advocacy will include: development and implementation of appropriate policy and legislative measures for working children and children in conflict with the law; strengthening of systems for monitoring labour practices and workplace conditions; and policy development for disabled children.

Monitoring and evaluation

25. Country programme monitoring and evaluation activities will take place within the framework of an integrated monitoring and evaluation plan, to be developed in late 2000. Information and research activities supported in the context of the promotion of the women's and children's rights programme will help strengthen baseline data, against which country programme progress will be measured.

Collaboration with partners

26. Within the framework of the UNDAF, and on the basis of the joint concerns identified in the CCA completed in 1999, UNICEF will collaborate closely with other United Nations agencies in the country in all aspects of the country programme. Specific areas of cooperation will include: polio eradication and IMCI implementation (with WHO); HIV/AIDS (with WHO and UNFPA); training of traditional birth attendants (with UNFPA); integrated community development (with WHO, UNDP, the Food and Agricultural Organization of the United Nations (FAO) and UNFPA); education reform (with the United Nations Educational, Cultural and Scientific Organization); and gender issues (with FAO, UNDP, UNFPA, the Office of the United Nations High Commissioner for Refugees and the United Nations Development Fund for

Women). Priority will also be placed on strengthening and expanding collaboration with bilateral development agencies, building on initial contacts established during the 1996-2000 programme period.

Programme management

27. The national coordinating body for the programme will be the State Planning Commission, which will organize interministerial meetings on a regular basis to review progress and take corrective actions. A number of changes in the office staffing structure are being proposed. These include the replacement of an existing National Officer post with two National Officer posts, one to be responsible for the disparity reduction programme and the other to be responsible for the programme on support to national policy and programme development. The cross-sectoral costs relate to the existing international professional post and support staff. Regular country management team meetings and monthly reviews of office work plans will be used as tools to manage the programme and improve programme performance. A programme and management review will be held at the end of 2001.

TABLE

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

GD COUNTRY : SYRIA
PROGRAM : 2001

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS a/										STAFF COSTS b/		
	RR	FOR	NOR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES :																	
DISPARITY REDUCTION	314,832			314,832	0	0	0	0	0	0	0	1	0	1	0	23,946	23,946
SUP.-NAT'L. POLIC. & PROG. DEV.	209,832			209,832	0	0	0	0	0	0	0	1	0	1	0	23,946	23,946
PROM.- CHILD. & WOM. RIGHTS	171,832			171,832	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS	229,504			229,504	0	0	0	1	0	0	1	0	3	4	128,726	57,171	185,897
TOTAL RR	926,000			926,000	0	0	0	1	0	0	1	2	3	6	128,726	105,063	233,789
OTHER RESOURCES :																	
DISPARITY REDUCTION		0	140,000	140,000	0	0	0	0	0	0	0	0	0	0	0	0	0
SUP.-NAT'L. POLIC. & PROG. DEV.		0	90,000	90,000	0	0	0	0	0	0	0	0	0	0	0	0	0
PROM.- CHILD. & WOM. RIGHTS		0	60,000	60,000	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL OR		0	290,000	290,000	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL RR & OR	926,000	0	290,000	1,216,000	0	0	0	1	0	0	1	2	3	6	128,726	105,063	233,789
SUPPORT BUDGET			Operating costs	150,150													
			Staffing		0	0	0	1	0	0	1	2	4	7	165,958	134,105	298,153
GRAND TOTAL (RR + OR + SB)					0	0	0	2	0	0	2	4	7	13	294,684	239,258	531,942
	Number of posts and staff costs:																
	Current programme cycle										2	3	9	14			
	At the end of proposed programme cycle (indicative only)										2	4	9	15	294,684	239,258	531,942

RR = regular resources.
OR = other resources.
FOR = funded other resources.
NOR = new other resources.
IP = International Professional.
NP = National Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.

United Nations E/ICEF/2000/P/L.45

Economic and Social Council

Distr.: Limited
13 July 2000

Original: English

For action

United Nations Children's Fund
Executive Board
Second regular session 2000
18-20 September 2000
Item 3 of the provisional agenda*

Country programme recommendation for a short-duration programme**

Palestinian children and women in Jordan, Lebanon, the Syrian Arab Republic and the West Bank and Gaza

Summary

The present document contains a recommendation for funding from regular resources and other resources for the programme for Palestinian children and women, with a duration of three years, to support activities that will lead to the preparation of a full-length country programme. The Executive Director *recommends* that the Executive Board approve the following amounts from regular resources, subject to the availability of funds, and the following amounts in other resources, subject to the availability of specific-purpose contributions, for the period 2001 to 2003:

Programme	Amount (United States dollars)		Duration
	Regular resources	*Other resources*	
Palestinian children and women in:			
Jordan	600 000	600 000	2001-2003
Lebanon	1 050 000	1 500 000	2001-2003
Syrian Arab Republic	600 000	355 000	2001-2003
West Bank and Gaza	2 550 000	11 400 000	2001-2003

* E/ICEF/2000/14.

** The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1999. They will be contained in the summary of recommendations for regular resources and other resources programmes (E/ICEF/2000/P/L.27).

00-54009 (E) 300800

Basic data

(1998 unless otherwise stated)

	Jordan	*Lebanon*	*Syrian Arab Republic*	*West Bank and Gaza*
Child population (millions, under 18 years)	0.74	0.17	0.20	1.5
U5MR (per 1,000 live births)	35	49	32	33 (1995)
IMR (per 1,000 live births)	32	42	29	27 (1995)
Underweight (% moderate and severe)	5[a] (1997)	-	3 (1996)	4 (1996)
Maternal mortality rate (per 100,000 live births)[a]	41 (1996)	-	60 (1999)	70-80 (1995)
Literacy (% male/female)	92/85 (1997)[b]	86/73	93/82 (1996)	92/79
Primary school enrolment (% net, male/female)	91/91 (1997)[b]	93/92	97/97 (1999)	91/91 (1998-99)
Primary school children reaching grade 5 (%)	98 (1997-98)[b]	-	83 (1999)	97 (1998-99)
Access to safe water (%)	96 (1997)[b]	68 (1999)	85 (1999)	84 (1995)
Routine EPI vaccines financed by Government (%)	100 (1999)	0	-	100
GNP per capita (US$)	-	-	-	1 560
One-year olds fully immunized against (%)				
tuberculosis	99	100 (1999)	88 (1996)	91
diphtheria/pertussis/ tetanus	98	100 (1999)	92 (1996)	98
measles	97	85 (1999)	86 (1996)	94
poliomyelitis	98	100 (1999)	96 (1996)	98
Pregnant women immunized against tetanus (%)	96	80 (1999)	80 (1996)	26

[a] The available data should be viewed with caution due to problems with underreporting and/or misclassification.

[b] National data for Jordan: no disaggregated statistics for the Palestinian population are available in these cases.

[c] Education for All 2000 report.

The situation of children and women

1. The situation and living conditions of Palestinian children and women vary widely from country to country, but in general, they live under difficult conditions and lack many basic rights and services. The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) is the lead United Nations agency responsible for Palestinians and is a key partner in UNICEF-assisted programmes. Following more than 50 years of insecurity, peace negotiations in the Middle East are making progress, albeit slowly.

2. In *Jordan*, there are about 1.5 million Palestinians registered as refugees with UNRWA, of which only 18

per cent live in its 10 official camps. The majority of refugees live outside the camps, are well integrated into Jordanian society and hold Jordanian passports. Many face challenges similar to those confronting poorer segments of the population, such as widespread unemployment, growing poverty (about one quarter of Jordanian households lay below the absolute poverty line 1997), and rapid population growth (an annual rate of over 2.5 per cent). Effective health control programmes have reduced the incidence of vaccine-preventable and diarrhoeal diseases, but acute respiratory infections (ARI) remain a problem among young children. Most children of pre-school age are cared for at home.

3. In *Lebanon*, some 350,000 Palestinians are registered with UNRWA, representing about 12 per cent of that country's total population. More than half of these refugees live in 12 camps. Palestinians in Lebanon face particular hardships. Strict controls on the expansion of camp boundaries and building in the camps have led to severe over-crowding and deteriorating camp infrastructure, and have forced some 32,000 Palestinians into 14 unserved squatter settlements on the periphery of the camps. The Palestinian refugees do not have access to government services and therefore rely entirely on UNRWA, UNICEF and philanthropic associations for health care, schooling and other basic services. UNRWA records define 10 per cent of the registered Palestinian population, representing some 9,600 families, as "special hardship" cases. Most of these extremely poor families are headed by divorced or widowed women, who are predominantly illiterate, unemployed and lack a regular income. Children from such families are often withdrawn from school so they can help supplement the family income. Recent surveys undertaken by the Palestinian Central Bureau of Statistics (PCBS) in 1998 revealed that more than half the working children 10 to 14 years of age were illiterate.

4. In the *Syrian Arab Republic*, some 374,500 Palestinian refugees are registered with UNRWA, representing about 3 per cent of the country's population. A third of these live in 10 official refugee camps. The Palestinian refugees in the Syrian Arab Republic do not have citizenship or voting rights, but enjoy virtually equal rights with nationals in other areas. Almost all are also eligible for UNRWA services. Poverty is widespread: a 1996 survey found that 48 per cent of Palestinian households in the Syrian Arab Republic lived either at or below the poverty line. Substantial disparities in social development and children's situations exist among the 10 official refugee camps and the unofficial Palestinian settlements. Neonatal mortality accounts for two thirds of deaths among children under the age of five. Diarrhoeal disease and ARI continue to pose a threat to children, owing in large part to poor environmental health conditions. Over 95 per cent of pre-school-age Palestinian refugee children are cared for at home. Primary school enrolment is high, but the drop-out rate is increasing, and quality concerns, including a dependence on rote learning and outdated course contents, remain. A 1998 PCBS survey found that 3 per cent of Palestinian children aged 10 to 14 and 23 per cent of children aged 15 to 17 worked, many in exploitative circumstances. PCBS figures indicate that around 83 per cent of Palestinian mothers in the Syrian Arab Republic receive antenatal care. A 1996 PCBS survey found that 46 per cent of births took place in the home, attended by a trained midwife, while the rest took place in hospitals or clinics.

5. In the *West Bank and Gaza*, an estimated 2.9 million Palestinians live in areas that form a geographic patchwork, where the majority of the population still live under Israeli security control. Some 41 per cent (or over 1 million) are registered as refugees and are entitled to basic services from UNRWA. The future now seems to hold promise for children, and the outcome of the peace process will significantly influence their future. Yet the dispersion of the population, as well as restrictions by Israel on movements associated with the fragmentation of land, continue to hinder access and service delivery. Despite the young age of the Palestinian Authority (established in 1994) and the limitations of its jurisdiction, it has given high priority to programmes and institutions to promote children's well-being. Examples are the incorporation of principles of the Convention on the Rights of the Child in the National Plan of Action (NPA) for Children, and the establishment of structures to implement them. Basic legislation and policies are still being formulated.

6. In recent years, improved access to health care services, near-universal immunization coverage, decreasing malnutrition rates, and a high literacy level have all contributed to declining under-five mortality rates (U5MR) and infant mortality rates (IMR). The maintenance of high primary school enrolment (above

90 per cent), despite rapid population growth, is also noteworthy.

7. Yet the high population growth rate (total fertility rate of 6.1) poses a challenge, requiring substantial investments simply to maintain current levels of social service delivery. The overall incidence of poverty is 25 per cent, with 16 per cent in the West Bank (mainly in Hebron and Jenin districts), and 38 per cent in Gaza. The U5MR varies between the West Bank and Gaza (32 and 37 per 1,000 live births, respectively) as well as between towns and villages. The relatively high maternal mortality rate (MMR) indicates problems in the quality of maternal health care services, since 95 per cent of births are attended by trained health care personnel, and the majority of women make at least one antenatal care visit. A UNICEF-supported survey showed worrying levels of goitre prevalence among children (68 per cent in Jericho). Despite the high primary school enrolment rates, national average scores for learning achievements are low. School drop-out rates and child labour are of concern: in 1998, 6 per cent of children aged 5 to 17 (some 63,600 children) were working.

8. Several factors combine to make life difficult for adolescents and youth: tensions and an uncertain future, a burgeoning young population (currently 53 per cent below the age of 18), bleak employment prospects, severely curtailed mobility, limited access to information and services, and limited opportunities for socializing and leisure. Stress within families often leads to violence and psychosocial problems. Adolescent girls are subject to early demands for domestic tasks or marriage (24 per cent of girls 15 to 19 are or have been married). Seventeen per cent of women have their first delivery during adolescence.

Programme cooperation, 1998-2000

Jordan

9. In Jordan, UNICEF cooperation contributed to maintaining high immunization coverage, improving health care and knowledge, and promoting early childhood care among the population registered with UNRWA. Community empowerment models were established in four low-income urban areas. These models have proven effective in organizing and mobilizing communities at the grass-roots level, as shown by an evaluation of this programme. These communities — primarily of Palestinian origin and previously dependent on individual relief assistance — have become well organized, contributing actively to the planning and implementation of a range of activities, including health education, training in livelihood skills, early childhood care and safe play, and legal and social counselling for women. Some 840 parents have been trained in parenting skills.

Lessons learned from past cooperation

10. The evaluation noted that UNICEF should strengthen its capacity-building interventions in the target areas of the community empowerment programme. Over past cycles, the programme design has made it difficult to differentiate between the impact of the Jordan country programme and the programme for Palestinian children and women in Jordan. This was due primarily to lack of adequate baseline data, and the fact that activities from one programme also benefited the other. The new programme will need more targeted objectives, stricter differentiation of geographic zones and better setting of baselines.

Lebanon

11. In Lebanon, a health and nutrition education campaign conducted in Palestinian camps and settlements reached 53,000 women (or about 80 per cent of women in the settlements) with basic information and training. An assessment at mid-term showed the positive impact of such activities. An initiative to address child labour provided 550 working children (aged 10 to 14 years, and identified as illiterate) with functional literacy training through a process involving employers, parents and the children themselves. The initiative also succeeded in shifting 77 children working under hazardous conditions, such as scavenging garbage, into safer jobs or vocational training. Continued support to the expansion and upgrading of pre-school services for refugees led to an increase from 60 to 73 per cent in pre-school enrolment from 1996 to 1999. Over 1,000 Palestinian children were made aware of child rights and the Convention on the Elimination of All Forms of Discrimination against Women. A revolving loan scheme promoted economic self-reliance for poor Palestinian women. The scheme has thus far provided 350 loans to some 1,700 persons;

women from female-headed households received more than half the loans.

Lessons learned from past cooperation

12. The lack of an official government counterpart meant heavy reliance by UNICEF on Palestinian associations, often divided along political lines, with weak implementing capacities. The future programme will thus need to build local capacities and make efforts to sensitize communities to the need to provide children with a harmonious and safe environment. Lack of baseline data also hampered UNICEF ability to plan, monitor and evaluate programme activities effectively. The establishment of baseline data using clearly defined indicators will therefore be a priority.

Syrian Arab Republic

13. The Syrian Arab Republic's Palestinian programme moved towards empowerment and a rights-based approach. A better-parenting initiative, which was designed to reach parents with basic messages on improving the care and stimulus given to young children, and a "good marriage" initiative, designed to equip adolescents and youth with life skills and knowledge, were introduced. UNICEF material support also helped to sustain vaccination coverage levels of over 95 per cent. Work with the Palestinian Red Crescent Society (PRCS) succeeded in introducing the Baby-Friendly Hospital Initiative to maternity facilities serving Palestinian mothers. UNICEF-supported assessments helped identify issues affecting the quality of key UNRWA health- and education-related services, such as HIV/AIDS education in UNRWA schools. An agreement was also reached with UNRWA to introduce the Global Education Initiative in UNRWA schools on a pilot basis beginning in the 1999-2000 school year. UNICEF material and training support helped improve the quality of more than 20 Palestinian kindergartens.

Lessons learned from past cooperation

14. The 1998-2000 programme was found to be overly ambitious. Future cooperation should therefore focus on a smaller number of priority activities through which UNICEF can make a significant impact. Second, the lack of measurable objectives and proper indicators constrained programme planning and evaluation. Specific, measurable objectives and clear indicators would need to be developed. Finally, cooperation focused primarily on the relatively well-served Palestinian camps in the area of Damascus, rather than on the neediest camps outside Damascus and the Palestinian communities living outside official camps. Priority should therefore be given to less-served communities, and cooperation with Palestinian non-governmental organizations (NGOs) active in these communities should be strengthened.

West Bank and Gaza

15. UNICEF support in training, provision of supplies and operational costs, including to the national cold-chain system and during National Immunization Days, ensured continuing immunization coverage of over 90 per cent. The management capacity of the Ministry of Health was strengthened through the establishment and functioning of a health management unit. UNICEF also contributed to the establishment of an Education Management Information System, which is now producing reliable and timely education data, the development of the first national Palestinian curriculum, by mainstreaming life skills and gender, and the launching of the Five-Year Education Development Plan. Through training of teachers and development of teaching/learning materials, the school health project reached an estimated 25,000 children and led to physical and developmental screening for all children entering grade one (55,000 per year). UNICEF support was crucial in strengthening the outreach capacity of the Ministry of Social Affairs, thus contributing to the reintegration of some 2,000 institutionalized children with their families. The programme also made a start in addressing some of the problems facing adolescents, through support to community centres and training programmes for youth leaders.

Lessons learned from past cooperation

16. The previous programme objectives proved to be too ambitious, given the difficulties of planning in an unstable environment and the newness of Palestinian institutions. UNICEF support to the Palestinian Authority will need to be more realistic and focused, complementing assistance provided by other agencies and organizations. UNICEF supported small-scale activities, often without being able to identify those with the potential to go to scale. The programme will therefore need to integrate these various initiatives and

link them to the ongoing process of national policy development. The programme's impact was limited by the fact that capacity was built only at the central level, not paying enough attention to the district level. Future cooperation will need to promote increased decentralization in programme planning, implementation and monitoring. Finally, the programme structure was found to be too sectoral, and therefore inadequate for addressing a range of cross-sectoral issues.

17. The 1998-2000 programme of cooperation did demonstrate, however, that UNICEF strengths lay in initiating and promoting innovative approaches to improve the quality of services and address disparities in access. The organization was also successful in advocating that child rights be placed at the centre of national policy dialogue. Concrete illustrations of "what worked" include: improving parental knowledge of child-care practices, making communities more child-friendly, introducing new learning approaches in schools through inputs to the national education plan, and improving the overall performance of health systems.

A. Palestinian children and women in Jordan

Recommended programme cooperation, 2001-2003

Estimated annual expenditure
(In thousands of United States dollars)

	2001	*2002*	*2003*	*Total*
Regular resources				
Child health	50	50	50	150
Early childhood care and development	60	60	60	180
Community empowerment	90	90	90	270
Subtotal	**200**	**200**	**200**	**600**
Other resources				
Child health	25	25	25	75
Early childhood care and development	75	75	75	225
Community empowerment	100	100	100	300
Subtotal	**200**	**200**	**200**	**600**
Total	**400**	**400**	**400**	**1 200**

Programme preparation process

18. Close collaboration was maintained with UNRWA during the situation analysis stage and throughout the programme development process, as well as with the local committees selected in the community empowerment programme. An evaluation of this programme formed a basis for the identification and planning of future interventions.

Programme goals and objectives

19. The programme will aim to sustain the progress made in survival and development goals for children registered with UNRWA in Jordan. It will also seek to improve the well-being of 3,750 families of Palestinian origin living in three low-income urban areas. Using a combination of supply delivery and capacity-building strategies, the programme will work closely with UNRWA, thereby reaching the poorer population using the agency's services. A second strategy will be to organize and empower selected communities with the knowledge and skills for solving their health and social problems. The programme will continue benefiting from the advocacy efforts of the regular Jordan country programme.

Relation to national and international priorities

20. The programme will contribute to alleviating the health and social problems of the poorer segments of the target population, a key national concern, and to addressing the traditional perception that child rearing is the mother's responsibility alone.

Programme strategy

21. The *child health programme* will contribute to sustaining gains made in child health and survival, and will benefit some 170,000 children under 5 years of age registered with UNRWA and using its health facilities. This will be done through providing refresher training on ARI, immunization and control of diarrhoeal diseases; providing training for health professionals working with UNRWA in the Integrated Management of Childhood Illnesses (IMCI) initiative; and supplying oral rehydration salts, vaccines and cold-chain and other equipment for use in UNRWA health centres.

22. The *early childhood care and development (ECCD) programme* will aim to ensure that at least 20 per cent of children whose parents use UNRWA outreach centres are cared for by their families in accordance with better-parenting principles. Some 30,000 children up to the age of six will benefit from the programme, which will support training in better-parenting skills. It will ensure that at least one third of parents graduating from the training courses are male; and that the selection of trainers, facilitators and better-parenting counsellors at UNRWA outreach centres is gender sensitive (at least 40 per cent male). The programme will also distribute relevant communication materials produced by the regular Jordan country programme, and will encourage the participation of UNRWA staff in supervisory and liaison committees. Supplementary funding will be used to expand the coverage of the programme.

23. The *community empowerment programme* will continue to organize and assist poor communities of Palestinian origin in identifying their needs and in developing and implementing community-based action plans to meet those needs. The programme will benefit some 3,750 families living in the urban areas of Hai Prince Hasan, Hai Mahasreh and Al-Shallalah, helping them to set up active and empowered local committees with equal male and female representation. UNICEF inputs will include training of community representatives in management and development, and selective service delivery interventions identified by the communities' plans of action. Priority will be given to the establishment and organization of safe play areas and child and youth centres. Women and youth will be trained in skills and craftsmanship. Funding from other resources will be used to expand this community empowerment model to additional communities.

Monitoring and evaluation

24. An integrated monitoring and evaluation plan (IMEP) will be prepared and implemented. Data will be drawn from UNRWA routine reports, field visits and reports of community committees and other partners. A national health facility survey in 2002 will provide input for the mid-term review of the child health programme. Assessments of the community empowerment programme and of child rearing practices are also planned.

B. Palestinian children and women in Lebanon

Recommended programme cooperation, 2001-2003

Estimated annual expenditure

(In thousands of United States dollars)

	2001	*2002*	*2003*	*Total*
Regular resources				
Primary health care	80	80	80	240
Child protection and development	80	80	80	240
Women's development	30	40	30	100
Monitoring, evaluation and planning	30	20	30	80
Cross-sectoral costs	130	130	130	390
Subtotal	**350**	**350**	**350**	**1 050**
Other resources				
Child protection and development	300	300	300	900
Environmental health	200	200	200	600
Subtotal	**500**	**500**	**500**	**1 500**
Total	**850**	**850**	**850**	**2 550**

Programme management

25. The counterparts for this programme will be UNRWA and the Department of Palestinian Affairs in the Ministry of Interior Affairs. At the local level, management and coordination structures will be established in close collaboration with women's and other community organizations. No additional support costs are required, since staff support will be provided through the regular Jordan country programme.

Programme preparation process

26. The process began with a series of meetings with representatives of 14 Palestinian associations and 12 camp Popular Committees, as part of the situation analysis process, to discuss and verify results of studies and surveys conducted in 1998 and 1999. UNRWA provided much of the data for the situation analysis. The mid-term review and subsequent programme development involved close cooperation with Palestinian associations, UNRWA, the PRCS, the General Union of Palestinian Women (GUPW) and the Popular Committees in each camp.

Programme goals and objectives

27. The programme will contribute to meeting the needs of Palestinian children and women in Lebanon and to empowering Palestinian youth to participate in their own development. This will be done through selected supply delivery and capacity-building interventions, working closely with UNRWA, PRCS and other entities serving the Palestinians, and through community empowerment strategies within the camps. Since UNRWA caters to the Palestinian child from age 6 on, UNICEF will target the pre-school group and working children, two groups for which UNRWA does not have programmes.

Relation to national and international priorities

28. The programme will address the needs of the Palestinian refugee population in Lebanon, an essential strategy to reduce risks linked to potential instability.

Programme strategy

29. The *primary health care programme* will sustain immunization coverage at over 95 per cent and improve access to health services and information among the refugee population. UNICEF will continue to provide vaccines, syringes, needles and cold-chain equipment to UNRWA; support the training of PRCS paramedical staff; and support health education in all camps. In cooperation with PRCS, UNICEF will develop a health education manual covering topics such as hygiene, healthy lifestyles for youth, family planning, consanguineous marriages, ARI, and HIV/AIDS. UNICEF will also provide some equipment to upgrade PRCS hospitals.

30. The *child protection and development programme* will aim to improve the quality of care for Palestinian children of pre-school age and increase access to services and information for the most vulnerable youth and children. This will be done through: providing support to 83 pre-school facilities in the camps and training to pre-school teachers in early childhood care; organizing monthly meetings between parents and pre-school teachers to upgrade both parental skills and community child-care services; promoting relations between Lebanese and Palestinian youth, and between physically able and disabled children; supporting community centres with leisure and study facilities that are run by youth in camps; organizing functional literacy classes for working children; and supporting counselling and protection services for delinquent and abused children. Close collaboration will continue with the Popular Committees in the camps and the GUPW. Funding from other resources will be used to extend the project to the squatter settlements outside the camps.

31. The *women's development programme* will promote the economic self-reliance of Palestinian women, particularly those heading households. The current revolving loan scheme will be expanded to benefit other needy women through providing start-up capital, training in management and administrative skills, and linking functional literacy and numeracy training to basic ECCD messages. The project will be implemented in cooperation with the Popular Committees and the GUPW, whose members manage the project on a volunteer basis.

32. For the *environmental health programme*, funding from other resources will be used for the maintenance and upgrading of environmental conditions of the unserved squatter settlements on the periphery of the camps.

Monitoring and evaluation

33. Baseline data and monitoring mechanisms will be established within the framework of an IMEP. A number of evaluations have already been planned. Contingency planning will be carried out to enable effective programmatic response to developments relating to the peace process. Community empowerment and self-reliance will continue to be promoted as an emergency preparedness strategy.

Programme management

34. The Palestinian Associations and Popular Committees will be the implementing partners. The existing UNICEF staff support structure — one national project officer, who coordinates all elements of the Palestinian programme, and one project assistant — will be maintained.

C. Palestinian children and women in the Syrian Arab Republic

Recommended programme cooperation, 2001-2003

Estimated annual expenditure

(In thousands of United States dollars)

	2001	*2002*	*2003*	*Total*
Regular resources				
Disparity reduction	78	77	77	232
Improving service quality	81	81	81	243
Monitoring and evaluation	31	32	32	95
Cross-sectoral costs	10	10	10	30
Subtotal	**200**	**200**	**200**	**600**
Other resources				
Disparity reduction	60	60	60	180
Improving service quality	45	40	40	125
Monitoring and evaluation	15	20	15	50
Subtotal	**120**	**120**	**115**	**355**
Total	**320**	**320**	**315**	**955**

Programme preparation process

35. Discussions relating to programme development were held during the mid-term review process, in close cooperation with key counterparts, such as the State Planning Commission, the Government Organization for Palestinian Arab Refugees (GOPAR), UNRWA, PCBS and PRCS. A situation analysis was developed in 1999 and served as a key input to discussions on the 2001-2003 programme of cooperation.

Programme goals and objectives

36. The programme will aim to reduce geographic disparities among Palestinian women and children, as defined by a basic set of social indicators; improve the quality of health and education services available to Palestinian children; and improve local capacity to plan effectively for Palestinian children. The programme will target disadvantaged areas with specific service delivery interventions, strengthen the capacity of health and education staff serving the Palestinian population, and support communication and empowerment strategies to educate the target population.

Relation to national and international priorities

37. The programme will be closely linked to, and will benefit from, overall UNICEF cooperation at the national level. It will be implemented within the framework of the planned United Nations Development Assistance Framework (UNDAF) for the Syrian Arab Republic. Through its focus on needy Palestinian communities, the programme will play an important role in supporting disparity reduction, a key national developmental priority.

Programme strategy

38. The *disparity reduction programme* will contribute to reducing geographic disparities, specifically targeting the Khan Danoun, Aleppo and

Homs official refugee camps, and the rural Damascus and Aleppo unofficial camps, where social indicators suggest poorer conditions for children and women. The programme will aim to create "healthy camps", where Palestinian children of all ages have access to the care, basic services and information needed for their optimal growth and development. This will be done through: a pilot multi-channel communication strategy for reaching family caregivers with selected messages on promoting the survival, growth and development of young children; "second chance" learning opportunities for adolescent girls not enrolled in the formal school system; and expansion of the "good marriage initiative", in order to reach young people in the target areas with information related to healthy lifestyles. Funding from other resources will be used to improve the physical environment in the target communities, such as expanding access to safe play spaces for young children and improving environmental sanitation conditions.

39. The *improving service quality* programme will aim to: increase the proportion of children attending UNRWA and PRCS health facilities who are treated within the framework of IMCI; increase the proportion of births attended by appropriately trained health personnel; and introduce global education and health education modules in UNRWA primary school classrooms. Technical support and training will be provided to incorporate IMCI into the health care services of UNRWA and PRCS, and to integrate traditional birth attendants into the primary health care system. Funding from other resources will be used to promote the introduction of school health education into the UNRWA primary school curriculum.

Monitoring and evaluation

40. Mechanisms for monitoring the situation of target groups will be developed, and various policy-oriented studies and assessments will be supported. The programme will cooperate closely with and support the capacity-building of PCBS and GOPAR in the implementation of monitoring and evaluation activities.

Programme management

41. The programme will be implemented in close cooperation with UNRWA, the PRSC, local camp committees, and concerned Syrian Arab Republic government ministries. GOPAR will be responsible for overall programme coordination. The programme is currently being managed by existing country office staff.

Programme preparation process

42. The process was a broadly participatory one, involving over 200 partners and child experts. Starting with the June 1999 assessment of UNICEF capacity-building support, it culminated in the November 1999 strategy meeting. The process brought together, in a series of meetings, Palestinian Authority counterparts, United Nations and bilateral agencies, NGOs, the media, university and individual experts and, for the first time, adolescents. The situation analysis adopted a life-cycle and rights-based approach, examining each stage of the child's development.

Programme goals and objectives

43. The programme of cooperation will aim to promote and monitor children and women's rights within Palestinian society. It will support national efforts to ensure the fulfilment of the rights of children and adolescents to development, protection and participation; and contribute to further reduction of IMR and U5MR by 30 per cent, and to reduction of MMR by 25 per cent.

Relation to national and international priorities

44. The proposed programme of cooperation will contribute to the implementation of the Palestinian Development Plan, the NPA for Children, and sectoral national plans and policies.

D. Palestinian children and women in the West Bank and Gaza

Recommended programme cooperation, 2001-2003

Estimated annual expenditure

(In thousands of United States dollars)

	2001	*2002*	*2003*	*Total*
Regular resources				
Promoting and monitoring children's and women's rights	170	178	168	516
Early childhood care for survival, growth and development	210	210	210	630
Promoting learning in child-friendly environments	180	180	180	540
Development and participation of adolescents	100	120	120	340
Cross-sectoral costs	190	162	172	524
Subtotal	**850**	**850**	**850**	**2 550**
Other resources				
Promoting and monitoring children's and women's rights	800	800	800	2 400
Early childhood care for survival, growth and development	1 220	1 220	1 220	3 660
Promoting learning in child-friendly environments	1 000	1 000	1 000	3 000
Development and participation of adolescents	730	730	730	2 190
Cross-sectoral costs	50	50	50	150
Subtotal	**3 800**	**3 800**	**3 800**	**11 400**
Total	**4 650**	**4 650**	**4 650**	**13 950**

Programme strategy

45. Strategies to achieve the objectives will comprise advocacy and national capacity-building to improve the quality of services; empowerment of families with knowledge and skills to improve child-care practices; and participation of key stakeholders, in particular adolescents and women, in programmes affecting their development. Emergency preparedness will be ensured through contingency plans for each sector. Using a life-cycle perspective and rights-based approach, the proposed programme will support priority interventions for each of the major developmental stages of childhood: early childhood, primary school-age children and adolescence. Equity and participation form cross-cutting themes throughout.

46. The *promoting and monitoring children's and women's rights programme* will aim to improve the quality and use of social data; promote the adoption and implementation of national policies and legislation that are in accordance with the principles of the two Conventions; and strengthen capacities to support and monitor children in need of special protection. The planning, monitoring and evaluation project will support the establishment and maintenance of a rights-based national monitoring system capable of generating data disaggregated by gender and geographic areas, and will aim to improve the quality of operational research. In addition, through participatory processes involving children, UNICEF will support the development and implementation of local action plans to transform 20 communities in 4 poor districts into "child-friendly communities". The second project will support

planning, legislation and policy formulation in the area of child protection; the training of social workers, judges and police; the supply of selected equipment and educational materials to specialized institutions for disabled children and orphans; and the development of community-based alternatives for disabled children and orphans in child-friendly communities. The third project will aim to build the capacity of various media (television, radio, print and theatres) to promote children's and women's rights. The main partners for this programme include: counterpart ministries, the NPA for Children Secretariat, the Higher Council for Childhood and Motherhood, the PCBS, national and international NGOs, the media, municipalities, and other United Nations agencies.

47. The *early childhood care for survival, growth and development (ECC-SGD) programme* will contribute to reducing maternal and neonatal deaths by one third, from the 2000 baseline in 6 disadvantaged districts — North, Middle Area and Rafah in Gaza Strip, and Hebron, Qalqilia, and Jericho in the West Bank — covering an estimated population of 400,000. It will also contribute to the goals of sustaining a national polio and neonatal tetanus-free status; eliminating measles by 2003; increasing exclusive breastfeeding by 25 per cent; eliminating iodine deficiency disorders; reducing iron deficiency anaemia from the current 28 to 20 per cent; and promoting nationwide policies, services and practices that foster early childhood development. The contribution to national goals will be made through promoting policies and interventions that are based on approaches developed in these six target districts.

48. The first two projects in this programme will focus on improving the availability of quality maternal and child health services and promoting preventive health measures within the six target districts. The IMCI approach will be introduced in 60 primary health care facilities in these districts, and support continues to immunization and promotion of breastfeeding. Maternal health services in these six target areas will be upgraded through training and provision of essential supplies. At the national level, support will be provided to the implementation of legislation regarding the production and distribution of iodized salt; research on micronutrient deficiencies; and inputs to health and nutrition policy development. The third project will promote policies, services and practices fostering early childhood care, through support to the development of a national policy; the establishment of two reference centres for childhood development; and the sensitization of approximately 6,000 families on child-care practices in 150 disadvantaged communities within the same 6 target districts. Main partners for the programme will include the counterpart ministries, the NPA for Children Secretariat, the PCBS, local NGOs (such as the Early Childhood Research Centre), the PRCS, Union of Palestinian Medical Relief Committees (UPMRC), the Palestinian Family Planning and Parental Association, health professionals and associations, the media, adolescents and United Nations agencies.

49. The *promoting learning in child-friendly environments programme* will address the equity, quality and relevance of basic education. More specifically, it will ensure basic education coverage for 98 per cent of children in the West Bank, with special attention to gender equity, geographic disparities, and children with special needs. It will also aim to increase the proportion of children in grade 4 with good scores, from 35 per cent in 1999 to at least 50 per cent in 2003. Specific UNICEF support will be directed towards: establishment of a school mapping system; monitoring the implementation of the national five-year education plan and providing policy inputs; implementing surveys on out-of-school children; developing tools for monitoring of learning achievement; and providing basic life skills education to drop-outs in selected disadvantaged areas. UNICEF will also support the gradual mainstreaming of life skills throughout the national curriculum for grades 1 to 3, and in pilot schools for grades 4 to 6; the training of 4,500 teachers; the development of criteria for schools to ensure that they are safe, protective, supportive and respectful of children's rights; the implementation of school policies based on these criteria; and the strengthening of parental involvement in their children's education. The main partners will include counterpart ministries, the media, local and international NGOs, universities, the NPA for Children Secretariat, UPMRC and other United Nations agencies.

50. The *development and participation of adolescents programme* will address the lack of resources and human capacity that has so far prevented the development of clear policies and programmes for this important group. A 1999 UNICEF-supported study on Palestinian young people highlighted the need for their

increased participation in the development process and the need for special programmes to improve their health, education, access to information and safe environments for socializing, learning and recreation. The programme will aim to give adolescents a more prominent role in Palestinian society and prepare them to be responsible citizens and parents. This will be done through encouraging their participation in society and supporting appropriate development activities.

51. The "society for adolescents" project will support the development of a coherent national policy on adolescents and will promote legislation that will take into account available research on lifestyles, mental health and such issues as honour killings, violence and substance abuse. The project will sensitize parents, teachers of secondary and vocational schools and social workers to adolescent issues; expand leadership programmes for adolescents; promote participation of Palestinian adolescents in regional, international and Internet forums; and establish children's parliaments in disadvantaged areas. The second project will help adolescents acquire critical skills that will enable them to adopt healthy lifestyles and deal with the complex challenges of Palestinian society. Life skills will be progressively integrated into the curriculum of 70 pilot secondary and vocational schools and 10 nonformal education programmes, and will also be promoted through peer programmes and innovative "edutainment" programmes on television and radio, which entertain and educate young people. Through NGOs, the project will build the skills of, and provide counselling to, marginalized and at-risk adolescents, such as disabled youth, orphans and victims of violence and abuse. The main partners for the programme will include counterpart ministries, the NPA for Children Secretariat, the media, universities, local NGOs, the PRSC, UPMRC, other United Nations agencies, and Palestinian adolescents themselves.

Monitoring and evaluation

52. An integrated monitoring, evaluation and research plan has been designed to assess progress regularly and measure the impact of projects and programmes. The programme will benefit from the establishment of baseline data as a result of the multiple indicator cluster survey (MICS) in 2000. The plan includes operational research on child protection issues, as well as knowledge, attitudes and practices surveys, to be conducted among different population groups, including professionals, parents and adolescents. The plan will be updated during annual programme reviews. Programme monitoring results, including field visits, as well as the findings of major evaluations, will feed into the mid-term review in 2002.

Collaboration with partners

53. The programme of cooperation will continue to be coordinated with the respective programmes of the other agencies of the United Nation system, through active participation in sectoral working groups coordinated by the United Nations Special Coordinator's Office. In addition, it will benefit from exchange of resources and information in United Nations thematic task forces, such as the gender task force. Programme activities will complement those supported by other agencies and donors.

Programme management

54. The Ministry of Planning and International Cooperation will be responsible for the coordination of the programme. Annual reviews will be held during the last quarter of each year, and a mid-term review will be held in 2002. Regular consultations with bilateral and multilateral organizations will be held within sectoral working groups. UNICEF will develop a resource mobilization strategy, which will involve bilateral and multilateral donors, as well as National Committees for UNICEF. The cross-sectoral costs will cover the salaries of the monitoring and evaluation officer, a driver and supply assistant.

TABLE

COUNTRY : WEST BANK
PROGRAM : 2001-2005

SUMMARY OF PROGRAMME BUDGET AND STAFF/ASSISTANCE COSTS

PROGRAMME SECTOR/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS BY										STAFF COSTS BY		
	RR	OR	NOR	TOTAL	ASG/T	ASG	P/D	P/HQ	P/FI	P/LI	IP	NP	LO	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES :																	
PROM. & MON. CHILD & WOM. RIGHTS	516,000			516,000	0	0	0	0	0	0	0	1	0	1	0	184,144	184,144
ECC-SGD	650,000			650,000	0	0	0	0	0	0	0	1	1	2	0	282,148	282,148
PROM. LEARNING IN CHILD-FR. ENV.	540,000			540,000	0	0	0	0	0	0	0	1	0	1	0	181,508	181,508
DEV. & PARTIC. OF ADOLESCENTS	340,000			340,000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS	324,000			324,000	0	0	0	0	1	0	1	0	2	3	290,224	221,851	512,075
TOTAL RR	2,550,000			2,550,000	0	0	0	0	1	0	1	3	3	7	290,224	869,651	1,159,875
OTHER RESOURCES :																	
PROM. & MON. CHILD & WOM. RIGHTS		0	2,400,000	2,400,000	0	0	0	0	0	0	0	0	1	1	0	96,950	96,950
ECC-SGD		0	3,360,000	3,360,000	0	0	0	0	0	0	0	0	1	1	0	121,603	121,603
PROM. LEARNING IN CHILD-FR. ENV.		0	3,000,000	3,000,000	0	0	0	0	0	0	0	0	1	1	0	96,950	96,950
DEV. & PARTIC. OF ADOLESCENTS		0	2,190,000	2,190,000	0	0	0	0	0	0	0	1	1	2	0	249,708	249,708
CROSS-SECTORAL COSTS		0	150,000	150,000	0	0	0	0	0	0	0	0	1	1	0	76,104	76,104
TOTAL OR		0	11,100,000	11,100,000	0	0	0	0	0	0	0	1	5	6	0	641,275	641,275
TOTAL RR & OR	2,550,000	0	11,100,000	13,650,000	0	0	0	0	1	0	1	4	8	13	290,224	1,510,926	1,801,150
SUPPORT BUDGET			Operating costs Staffing	583,472													
GRAND TOTAL (RR + OR + SB)					0	0	1	1	0	0	2	1	4	7	717,768	735,566	1,453,334
					0	0	1	1	1	0	3	5	12	20	1,007,992	2,246,492	3,254,484
	Number of posts and staff costs Current programme cycle At the end of proposed programme cycle (indicative only)										3 3	1 1	4 12	16 20	1,007,992	2,246,492	3,254,484

RR = Regular Resources
OR = Other Resources
NOR = Non-core Resources
IP = International Professional
NP = National Professional
LO = Local Office

United Nations E/ICEF/2000/P/L.16

Economic and Social Council

Distr.: Limited
11 August 2000

Original: English

For action

United Nations Children's Fund
Executive Board
Second regular session 2000
14-20 September 2000
Item 7 of the provisional agenda*

Recommendation for approval of additional regular resources for 21 country programmes

Summary

The estimated funding target and financial plan contained in the medium-term plan (MTP) for the period 1998-2001 (E/ICEF/1998/13 and Corr.1) was approved by the Executive Board at its second regular session of 1998 (E/ICEF/1998/8/Rev.1, decision 1998/22). Planning levels for regular resources (formerly general resources) for country programmes are established on the basis of the approved MTP, taking into account the latest projections of income and expenditure.

The regular resources indicative planning levels for 2001-2004 have been computed using the modified regular resources allocation system described in document E/ICEF/1997/P/L.17 and Corr.1 and approved by the Executive Board at its 1997 annual session (E/ICEF/1997/12/Rev.1, decision 1997/18). As a result of the application of the modified system and the estimated global levels of regular resources available for programmes in 2001 and 2002, the levels of regular resources planned for 21 countries, 19 of whose programme cycles end in 2001 and 2 with programme cycles ending in 2002, is higher than the balance of approved regular resources available to these countries.

The Executive Director recommends that the Executive Board approve allocations of additional regular resources in the total amount of $41,869,204 to fund the approved country programmes of 19 countries (Bosnia and Herzegovina, Central African Republic, Côte d'Ivoire, former Yugoslav Republic of Macedonia, Malawi,

* E/ICEF/2000/14

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Maldyna, Mongolia, Morocco, Mozambique, Nepal, Nigeria, Pacific Island countries, Paraguay, South Africa, Sudan, Togo, United Republic of Tanzania, Yemen and Zambia) for 2001 and 2 countries (Cameroon and Mali) for 2001 and 2002, whose regular resources planning levels, based on the modified allocation system and estimated global levels of programmable regular resources, are higher than the balance of approved funds for these countries.

I. Introduction

1. The regular resources (formerly general resources) planning levels for 19 countries, whose programme cycles end in 2001, and 2 countries, whose cycles end in 2002, are higher than the balances of approved regular resources, as a result of the application of the modified system for allocation of regular resources and revised projections of global levels of regular resources available for allocation to country programmes in 2001 and 2002. The table below sets out the balance of approved regular resources available to those countries, the regular resources levels planned for each of the countries, and the additional amount of regular resources for which approval is needed to reach the planning level.

Regular resources

(In United States dollars)

Region/country	Balance of approved RR as at 1 Jan. 2001	RR planning level for 2001-2002	RR planning level for 2003	Increase to be approved in 2000
Eastern and Southern Africa				
Malawi	2 075 008	4 480 000	–	2 404 992
Mozambique	4 669 298	7 669 000	–	3 067 702
South Africa	799 836	832 000	–	32 164
United Republic of Tanzania	4 251 914	7 710 428	–	1 458 514
Zambia	1 384 110	3 197 000	–	1 812 890
Subtotal	**33 517 166**	**23 888 428**	–	**10 776 262**
West and Central Africa				
Cameroon	2 023 238	2 279 785	2 201 000	2 457 567
Central African Republic	731 279	1 478 857	–	747 578
Côte d'Ivoire	1 170 532	3 053 000	–	1 882 468
Mali	5 096 881	5 332 039	5 327 000	5 562 958
Nigeria	9 130 566	22 172 412	–	13 041 846
Togo	768 000	1 442 000	–	674 000
Subtotal	**18 900 376**	**35 758 093**	**7 528 000**	**24 386 817**
Americas and the Caribbean				
Paraguay	652 000	690 000	–	38 000
Subtotal	**652 000**	**690 000**	–	**38 000**

Region/country	Balance of approved RR (A) 2001	RR planning level (B) 2001	IR planning level (B) 2002	Amount to be approved (B-A)
East Asia and the Pacific				
Malaysia	545 572	600 000	-	54 428
Mongolia	815 506	1 092 000	-	276 494
Pacific Island countries	1 268 145	2 001 038		732 893
Subtotal	**2 629 223**	**3 693 038**	-	**1 063 815**
South Asia				
Nepal	3 092 473	4 203 000	-	1 110 527
Subtotal	**3 092 473**	**4 203 000**	-	**1 110 527**
CEE/CIS/Baltic St.				
Bosnia and Herzegovina	595 000	622 000	-	27 000
For. Yug. Rep. of Macedonia	583 687	620 000	-	36 313
Subtotal	**1 178 687**	**1 242 000**	-	**63 313**
Middle East and North Africa				
Morocco	1 123 126	1 638 000	-	514 874
Sudan	1 906 747	4 829 139	-	2 922 392
Yemen	2 260 996	3 046 000	-	785 004
Subtotal	**5 290 869**	**9 513 139**	-	**4 222 270**
Total	**44 855 494**	**78 987 698**	**7 528 000**	**41 660 204**

RR = regular resources.

II. Recommendations for additional regular resources

A. Eastern and Southern Africa

Malawi

2. The country programme for Malawi, covering the period 1997-2001 (E/ICEF/1996/P/L.3/Add.1), was approved by the Executive Board at its third regular session in September 1996 with an allocation of $14,750,000 in regular resources (E/ICEF/1996/12/Rev.1, decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $2,404,992 from regular resources, for which approval is sought.

3. The overall objectives of the programme, as outlined in the country programme recommendation, are to generate broad-based support and partnerships for the fulfilment of the rights enshrined in the Convention on the Rights of the Child; and contribute to an enabling environment that places highest priority on the needs and protection of children and on a change of attitudes and behaviour, especially among youth. These objectives are being realized through programmes in the areas of health; water and sanitation; care and nutrition; youth and education; and social policy, advocacy and communication. The additional $2,404,992 will assist in the realization of these objectives, with an estimated allocation of $687,677 to the health programme for increased expenditures on activities to raise immunization levels, to reduce iodine deficiency disorders (IDD) and to build district capacity for essential obstetric services;

$187,470 to expand the programme in water and sanitation in support of 80 per cent access to water and 60 per cent coverage of adequate sanitation in three districts serving 400,000 people; $348,920 to reinforce the contribution to the alleviation of the personal and social impact of an estimated 290,000 AIDS orphans and support increased care and learning opportunities for pre-school-age children; $332,816 to the youth and education programme to increase and sustain school enrolment at 90 per cent and to increase the retention of girls; $459,587 to the social policy, advocacy and communication programme for use in increasing resources to assist the National Commission on Children and the Commission on Women to accelerate the implementation of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women; and $388,522 for programme support, which will strengthen the management of the country programme.

Mozambique

4. The current short-duration country programme for Mozambique, covering the period 1999-2001 (E/ICEF/1998/P/L.23), was approved by the Executive Board at its second regular session in September 1998, with an allocation of $18,238,000 in regular resources (E/ICEF/1998/6/Rev.1, decision 1998/15). The increased planning level for 2001 will provide the programme with an additional $3,067,702 from regular resources, for which approval is sought.

5. The overall goal of the country programme is to support and strengthen Mozambican capacity to promote, protect and fulfil children's rights, meet their basic needs and expand opportunities for children to reach their fullest potential. UNICEF support is being provided through 14 projects comprising the following programmes: child rights mobilization and protection; health and nutrition; basic education; and water, sanitation and hygiene promotion. The additional $3,067,702 will be allocated among these programmes, with $644,000 going to the child rights mobilization and protection programme to expand public awareness and understanding of the changing situation of children and women and to promote the commitment and capacity of the Government and civil society to act for the fulfilment of children's rights; $614,000 to the health and nutrition programme to further expand the work with the Ministry of Health to promote sustained improvements in the health, nutrition and well-being of children and women through increasing coverage and access to essential primary health care services; $583,000 to the basic education programme to enhance the support to the Ministry of Education in the development of policies and strategies to promote increased primary enrolment, progress and achievement, especially for girls, and to provide learning opportunities for out-of-school children; $644,000 to support an expansion in the water, sanitation and hygiene promotion programme, which will further control diarrhoeal and other diseases associated with inadequate water supplies, sanitation and poor hygiene practices; and $582,702 for programme support to manage the overall country programme.

South Africa

6. The country programme for South Africa, covering the period 1997-2001 (E/ICEF/1996/P/L.6/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $5,200,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $32,164 in regular resources, for which approval is sought.

7. The country programme seeks to move from traditional service delivery-oriented programming towards a knowledge-based, flexible and adaptable approach, which takes into account the strategic advantage of UNICEF in South Africa and the unique cooperation through the intersectoral National and Provincial Programme of Action for Children Steering Committees. The programme aims to "make democracy work for children" by supporting processes that mobilize resources at all levels of society, so that the goals for the year 2000 are met and the rights of all children and women are honoured. To support the achievement of these goals, seven programmes are being implemented: social policy and programme development; public mobilization and programme communication; health and nutrition; hygiene and environmental sanitation; education; child protection; and monitoring and evaluation. The additional $32,164 will be used in the child protection programme for further research for the situation analysis on orphans affected and infected by HIV/AIDS.

United Republic of Tanzania

8. The country programme for the United Republic of Tanzania, covering the period 1997-2001 (E/ICEF/1996/P/L.7/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $31,720,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $3,458,514 in regular resources, for which approval is sought.

9. The aims of the programme are to achieve the following by the year 2001: reduce the infant mortality rate (IMR) and under-five mortality rate (U5MR) to 80 and 100 per 1,000 live births respectively; reduce severe and moderate malnutrition to 3 and 15 per cent respectively; reduce the maternal mortality rate (MMR); increase primary school net enrolment from 53 to 80 per cent, increase the primary school completion rate from 70 to 85 per cent, and provide complementary basic education opportunities to out-of-school children and adolescents, particularly girls; enhance consistency between the stipulations of the two Conventions on the one hand, and government legislation, policy and administrative practice on the other; and increase the protection of children in especially difficult circumstances. In order to enhance the realization of the country programme aims, it is proposed to allocate the additional $3,458,514 among the programmes as follows: $171,917 to the social policy analysis, monitoring and evaluation programme to build capacity to plan for human development; $1,331,273 to health, nutrition, water, environment and sanitation to continue the improvement of the provision and utilization of antenatal, postnatal and birth delivery services by women and the community, and to further the improvement of the delivery and utilization of immunization services for children u der five years of age and women of child-bearing age; $30,460 to the basic education programme to assist in the provision of equitable quality primary education and the achievement of improved enrolment, retention and transition rates; $12,261 to the children's and women's rights programme to enhance the strategic support to the Government, non-governmental organizations (NGOs) and civil society for the promotion, implementation and monitoring of children's and women's rights within the framework of the two Conventions; $1,056,550 to the community-based programme to assist in the achievem:nt of the objective to improve the lives of children and women at community level within selected districts; $120,842 for the Zanzibar programme to continue the support of social sector reforms; $2,063 to contribute towards the needs of refugees within the Kagera and Kigoma regions; and $733,148 to strengthen management support for the country programme.

Zambia

10. The country programme for Zambia, covering the period 1997-2001 (E/ICEF/1996/P/L.8/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $10,250,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $1,812,890 in regular resources, for which approval is sought.

11. The overall goals of the programme are to strengthen Zambia's capacity to promote sustained improvements in the survival, development and welfare of women and children and to support achievement of the country's national goals through programmes of support in the areas of primary health care and nutrition; Education for All; water, sanitation and hygiene education; and child protection. The major objectives of the country programme are to reduce infant, young child and maternal mortality; reduce young child malnutrition; stabilize HIV infection rates; ensure that all children between the ages of 7 and 13 have access to quality education; and increase access to clean water and sanitation. It is proposed that the additional $1,812,890 be allocated among the programmes as follows: $607,390 to the health and nutrition programme to continue sustained improvements in the health, nutrition and well-being of women and children through increasing coverage, quality and access to essential primary health care; $300,500 to the Education for All programme to ensure continued access to quality education for all children of primary school age; $365,000 for child protection to further heighten awareness of, commitment to and action on the rights of children and women; $400,000 to the water, sanitation and health education programme to further the reduction in morbidity and mortality due to diseases associated with inadequate water supplies and sanitation and poor hygiene practices; and $140,000 for programme support to manage the country programme.

B. West and Central Africa

Cameroon

12. The country programme for Cameroon, covering the period 1998-2002 (E/ICEF/1997/P/L.1/Add.1), was approved by the Executive Board at its third regular session in September 1997, with an allocation of $6,500,000 in regular resources (E/ICEF/1997/12/Rev.1, decision 1997/22). The increased planning levels for 2001 and 2002 will provide the programme with an additional $256,567 in regular resources in 2001 and a total of $2,201,000 in regular resources in 2002, for which approval is sought.

13. The goals of the programme are to support the rights of children and women, contribute to the improvement in the efficiency and effectiveness of basic social services, and contribute to a 50 per cent reduction in infant mortality and an increase of 20 per cent in girls' enrolment in primary schools, through the implementation of programmes in health and nutrition, basic education, social policies and statistics, and information and social communication. The additional $256,567 in regular resources for 2001 will be allocated to projects in HIV/AIDS and youth health. The $2,201,000 for 2002 will be allocated among the programmes as follows: $664,000 for health and nutrition; $360,000 for HIV/AIDS; $190,000 for social communication; $525,000 for education; $350,000 for social policies and statistics; and $112,000 for cross-sectoral costs. These funds will be used to support the achievement of the objectives contained in the approved country programme recommendation.

Central African Republic

14. The country programme for the Central African Republic, covering the period 1997-2001 (E/ICEF/1996/P/L.9/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $5,000,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $767,578 in regular resources, for which approval is sought.

15. The goals of the programme are to reduce infant, under-five and maternal mortality, reduce the percentage of malnourished children, increase school enrolment, and increase access to water and sanitation, through the implementation of programmes in health and nutrition, basic education, water and sanitation, information and communication, and monitoring and evaluation. It is proposed that the additional $767,578 be allocated among the programmes as follows: $340,857 to the health and nutrition programme to continue sustained improvements in the health, nutrition and well-being of women and children, through increasing coverage and quality of, and access to, essential primary health care; $150,000 to the Education for All programme to ensure continued access to quality education for all children of primary-school age; $150,000 to the water, sanitation and health education programme to further the contribution to the reduction in morbidity and mortality due to diseases associated with inadequate water supplies and sanitation and poor hygiene practices; $26,721 to the information and communication programme to further ensure the dissemination of information on the two Conventions; and $100,000 for monitoring and evaluation to support national capacity in the collection and management of information.

Côte d'Ivoire

16. The country programme for Côte d'Ivoire, covering the period 1997-2001 (E/ICEF/1996/P/L.10/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $10,250,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $1,882,468 in regular resources, for which approval is sought.

17. The aims of the programme of cooperation are to contribute to achievement, by the year 2001, of: reduction of IMR from 90 to 50 per 1,000 live births, U5MR from 150 to 70 per 1,000 live births, and MMR from 600 to 300 per 100,000 live births; wider dissemination of knowledge of the two Conventions; and enhancement of consistency between the stipulations of the Conventions on the one hand, and government legislation, policy and administrative practice on the other. In order to achieve the country programme aims, it is proposed to allocate the additional $1,882,468 among the programmes as follows: $451,792 to the health and nutrition programme for increased expenditures on activities to increase immunization levels, to reduce IDD and to build capacity for essential obstetric services; $282,370 to the basic education programme to assist in the provision of equitable quality primary education and

the achievement of improved enrolment, retention and transition rates; $282,370 for the urban/children in difficult circumstances programme to further expand the access to basic social services for disadvantaged children in poor urban areas; $225,896 for the information and communication programme to support the wider dissemination of information on the two Conventions; $263,546 for the water and environmental sanitation programme to reduce diarrhoeal disease, eradicate dracunculiasis, and reduce the workload of women, by making potable water more accessible; $188,247 to the planning, monitoring and evaluation programme to further the aims to build capacity to plan for human development; and $188,247 for programme support to manage the country programme.

Mali

18. The country programme for Mali, covering the period 1998-2002 (E/ICEF/1997/P/L.3/Add.1), was approved by the Executive Board at its third regular session in September 1997, with an allocation of $16,605,000 in regular resources (decision 1997/22). The increased planning levels for 2001 and 2002 will provide the programme with an additional $235,558 in regular resources in 2001 and a total of $5,327,000 in regular resources in 2002, for which approval is sought.

19. The goal of the programme is to contribute to the realization of the rights of children and women through the implementation of survival, development and protection programmes. The additional $235,558 will be used in 2001 to further the objectives of the survival programme, which are to contribute to national efforts to reduce by 40 per cent under-five mortality caused by diarrhoeal disease, acute respiratory infections (ARI) and malnutrition; to reduce by 80 per cent vaccine preventable diseases in children up to the age of five; and to reduce MMR by 30 per cent. The $5,327,000 for 2002 will be allocated among the programmes as follows: $2,406,000 for the survival programme; $1,764,000 for the development programme; $539,000 for the protection programme; and $618,000 for the information and planning programme. These funds will be used to support the achievement of the objectives contained in the approved country programme recommendation.

Nigeria

20. The country programme for Nigeria, covering the period 1997-2001 (E/ICEF/1996/P/L.13/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $67,000,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $13,041,846 from regular resources, for which approval is sought.

21. The overall goal of the country programme is to support, with other development partners, the achievement of Nigeria's National Plan of Action (NPA) goals. The objectives are to enhance knowledge of the situation of children and women at all levels of Nigerian society; improve awareness and support implementation of the Convention on the Rights of the Child; strengthen the commitment and capacity of states and Local Government Authorities (LGAs) to accelerate the development and implementation of local plans of action (LPAs); support expansion of basic social services in the most underserved states, LGAs and communities; and develop communication packages to promote behavioural change in support of NPA goals. The additional $13,041,846 will be allocated among the programmes as follows: $4,371,238 for the health and nutrition programme to further enhance the objectives of revitalizing the primary health care system, reducing malnutrition among children under five years of age, and reducing iron deficiency anaemia by 25 per cent in the 250 targeted LGAs; $2,142,847 for the basic education programme to contribute to the objectives of increasing girls' enrolment in eight northern states from 30 to 60 per cent, increasing boys' completion rates in eastern states from 40 to 80 per cent, and reducing the primary education gender gap nationally from 20 to 10 per cent; $1,628,719 for the water and environmental sanitation programme to continue the improvement in access to water and sanitation; $896,826 for the advocacy and social mobilization programme to further the aim of positive behavioural change at community and household levels; $1,865,811 for the planning, monitoring and evaluation programme to contribute to capacity and institution building for the formulation and implementation of LPAs; and $2,136,405 to support the management of this large country programme.

Togo

22. The country programme for Togo, covering the period 1997-2001 (E/ICEF/1996/P/L.15/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $5,000,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $674,000 in regular resources, for which approval is sought.

23. The overall goal of the country programme is to improve the survival, development and gender balance for the benefit of the most deprived children and women in Togo. The additional $674,000 will be allocated among the programmes as follows: $294,000 will be used for the health programme to reduce infant and child mortality and contribute to polio eradication and the elimination of neonatal tetanus; $129,000 for the girls' education programme to further the objective of 80 per cent primary school enrolment of girls; $149,000 for the strengthening of the community capacities programme for community development in a range of districts; $43,000 for the monitoring and evaluation programme to improve data collection; and $59,000 to support management of the country programme.

C. Americas and the Caribbean

Paraguay

24. The country programme for Paraguay, covering the period 2000-2001 (E/ICEF/1999/P/L.26), was approved by the Executive Board at its second regular session in September 1999, with an allocation of $1,417,000 in regular resources (E/ICEF/1999/7/Rev.1, decision 1999/13). The increased planning level for 2001 will provide the programme with an additional $38,000 in regular resources, for which approval is sought.

25. This short-duration programme aims to accelerate achievement of the goals of the World Summit for Children. It focuses on keeping the rights of children and women high on the country's agenda. The additional $38,000 will be used to further enhance the achievement of the objectives of the community-based survival and development programme to decrease the high rates of maternal and child mortality and morbidity in selected local communities.

D. East Asia and the Pacific

Malaysia

26. The country programme for Malaysia, covering the period 1997-2000 (E/ICEF/1996/P/L.28/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $3,000,000 in regular resources (decision 1996/29). A one-year extension to the country programme of Malaysia, covering the year 2001 (E/ICEF/2000/P/L.19), was approved by the Executive Board at its first regular session in January 2000 (E/ICEF/2000/8 (part I), decision 2000/2) to utilize the unspent approved balance of regular resources. The increased planning level for 2001 will provide the programme with an additional $54,428 in regular resources, for which approval is sought.

27. The objectives of the country programme are to support the achievement of the goals for the year 2000; to help implement and monitor the Convention on the Rights of the Child; and to explore opportunities for Malaysia to contribute to efforts for children in other developing countries. The additional $54,428 will be used in the child survival programme with the objective of reinforcing activities to support government and community efforts to further reduce maternal mortality and deaths from ARI.

Mongolia

28. The country programme for Mongolia, covering the period 1997-2001 (E/ICEF/1996/P/L.29/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $3,750,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $276,494 in regular resources, for which approval is sought.

29. The country programme supports the Government of Mongolia to sustain and expand its achievements in implementing the Convention on the Rights of the Child and the NPA, and to increase local capacity to undertake more cost-effective and sustainable initiatives. It is proposed to allocate the additional funds among the programmes as follows: $100,000 to the health programme to support capacity-building, community participation and advocacy to carry out immunization, reduce IDD and promote breastfeeding and complementary feeding practices; $50,000 to the

education programme to strengthen selected national education policies and increase the effectiveness of key education practices, thus improving the quality of basic education; $50,000 to the area-based programme to further enhance the revitalization of health care systems at district and subdistrict level and to strengthen the social dimension of the Government's poverty alleviation programme; $26,494 for the child and family welfare programme to strengthen the capacity of the Government, community groups and NGOs to provide preventive and rehabilitation services to urban street children and disabled children, mainly through community-based activities; and $50,000 to the monitoring and evaluation programme for ongoing monitoring of the NPA goals and to strengthen the role and capacity of the Government and NGOs to monitor and promote child rights.

Pacific Island countries

30. The country programme for Pacific Island countries, covering the period 1997-2001 (E/ICEF/1996/P/L.30/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $7,000,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $732,893 in regular resources, for which approval is sought.

31. The Pacific Island countries programme covers 13 countries and supports the Governments in achieving their specific goals for children. The additional $732,893 will be allocated as follows: $250,000 to the health programme for support to breastfeeding, nutrition activities, ARI and control of diarrhoeal diseases (CDD), environmental sanitation and, where applicable, malaria control; $200,000 to the education programme to continue to improve the quality of primary education by empowering communities to better prepare children to participate in primary education; $100,000 for the child and youth advocacy programme to continue building and strengthening networks to address a broad range of child and youth concerns, including juvenile justice, child protection, substance abuse, youth sexual health and suicide; $50,000 to the monitoring and evaluation programme to provide technical assistance to document and highlight issues related to the Convention on the Rights of the Child; and $132,893 to support the management of the country programme.

E. South Asia

Nepal

32. The country programme for Nepal, covering the period 1997-2001 (E/ICEF/1996/P/L.32/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $18,400,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $1,110,527 in regular resources, for which approval is sought.

33. The Nepal country programme is closely related to the country's broader goals and objectives for human development, which reflect the declarations of recent world summits and international conferences. The country programme contributes to meeting needs as defined by the NPA and to fulfilling the rights of children and women. It is proposed that the additional $1,110,527 be allocated as follows: $200,000 to the health programme to support the objectives of the safe motherhood programme in reducing infant and maternal mortality; $100,000 to the nutrition programme to contribute to the reduction of protein-energy malnutrition; $10,527 to the education programme to support improved teacher training in basic skills such as reading, writing and classroom management; $150,000 to the water and environmental sanitation programme to enhance the promotion of low-cost water schemes and their maintenance by communities and to educate communities on the importance of health and hygiene practices; $100,000 for the women- and family-centred programme to further the aims to improve the physical and social environment of children and families by influencing family health and nutritional conditions, child-rearing responsibilities and family/household rights and responsibilities, and by strengthening self-confidence of all family members; $250,000 for the decentralization programme to continue the support for the village-based, capacity-building development process, designed to gather detailed, accurate and usable data rapidly and at low cost; $50,000 for the child protection programme to support activities related to the prevention of child exploitation, violence, abuse and negligence; $150,000 for the communication and advocacy programme to disseminate information to policy makers, parliamentarians and other decision makers; and $100,000 for the monitoring and

F. Central and Eastern Europe/ Commonwealth of Independent States and the Baltic States

Bosnia and Herzegovina

34. The country programme for Bosnia and Herzegovina, covering the period 1999-2001 (E/ICEF/1998/P/L.35) was approved by the Executive Board at its second regular session in September 1998, with an allocation of $2,335,000 in regular resources (decision 1998/15). The increased planning level for 2001 will provide the programme with an additional $27,000 in regular resources, for which approval is sought.

35. The overall goal of the proposed programme is the enhancement of survival, development, protection and participation prospects of children and women in Bosnia and Herzegovina, through the rights-based approach, built around the principles of the Convention on the Rights of the Child and improvement of social policies and cost-effective approaches. The additional $27,000 will be used to support the running of the Banja Luka suboffice, which is key to the implementation of the country programme.

Former Yugoslav Republic of Macedonia

36. The country programme for the former Yugoslav Republic of Macedonia, covering the period 1999-2001 (E/ICEF/1998/P/L.38), was approved by the Executive Board at its second regular session in September 1998, with an allocation of $1,853,000 in regular resources (decision 1998/15). The increased planning level for 2001 will provide the programme with an additional $36,313 in regular resources, for which approval is sought.

37. The underpinning principle of the country programme is to make the Convention on the Rights of the Child a reality in the daily lives of children and youth. A rights-based approach provides the conceptual guidance for UNICEF cooperation in the country, in close cooperation with the Government and civil society. The additional $36,313 will be used in the health and nutrition programme to support the

G. Middle East and North Africa

Morocco

38. The country programme for Morocco, covering the period 1997-2001 (E/ICEF/1996/P/L.37/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $7,360,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $514,874 in regular resources, for which approval is sought.

39. The general objective of the country programme is to contribute, within the framework of the Convention on the Rights of the Child, to the realization of national objectives, with particular priority given to the reduction of IMR and MMR, increased access to clean water, and expansion of basic education. The additional $514,874 will be divided as follows: $95,300 for communication and planning to ensure the wide dissemination of information related to the Convention on the Rights of the Child; $87,000 to further address issues related to child protection; and $332,574 for interventions in the integrated rural development programme.

Sudan

40. The country programme for Sudan, covering the period 1997-2001 (E/ICEF/1996/P/L.39/Add.1), was approved by the Executive Board at its third regular session in September 1996, with an allocation of $19,650,000 in regular resources (decision 1996/29). The increased planning level for 2001 will provide the programme with an additional $2,922,292 in regular resources, for which approval is sought.

41. The objectives of the country programme are to reduce disparities in access to services and the coverage of children and women and to strengthen sustainability of these services; strengthen primary health care, basic education and water supply and sanitation systems so as to expand service coverage and improve the sustainability of programmes in selected disadvantaged regions; improve information systems on the status of children and enhance national capacity to make sustainable progress towards the NPA goals; and expand protection services for children in

especially difficult circumstances. The additional $2,922,992 will be allocated as follows: $868,139 for the health and nutrition programme to enhance the support to service delivery, to increase immunization coverage for all antigens to at least 80 per cent and sustain these levels, to reduce child morbidity and mortality due to preventable diseases, to improve case management for diarrhoea and ARI, and to provide vitamin A, iron and folic acid supplementation; $600,000 for the water supply and sanitation programme to strengthen interventions to increase access to, and use of, safe drinking water among rural and displaced populations from 30 to 40 per cent, and in dracunculiasis-endemic areas from 10 to 30 per cent; $665,000 for education and protection to continue support to implementation of community-based education approaches and the provision of essential community-based services for 200,000 traumatized children; $150,000 for the area-based programme for formation and training in village communities; and $643,253 for the planning and advocacy programme to continue the focus on integrating gender concerns into all programmes and improving planning, monitoring and evaluation of national programmes for children and women.

Yemen

42. The country programme for Yemen, covering the period 1999-2001 (E/ICEF/1998/P/L.33), was approved by the Executive Board at its second regular session in September 1998, with an allocation of $7,861,000 in regular resources (decision 1998/15). The increased planning level for 2001 will provide the programme with an additional $785,004 in regular resources, for which approval is sought.

43. The country programme contributes to the implementation of the Convention on the Rights of the Child, the reduction of infant and under-five mortality rates, and improvement in primary school enrolment and retention, particularly of girls. The additional $785,004 will be allocated among the programmes as follows: $250,000 to the health and nutrition programme to continue support to immunization coverage, CDD, and reduction in deaths due to ARI; $100,000 to the education programme to contribute to efforts to increase primary net enrolment of girls and primary school completion rates; $300,000 for the area-based programme to enhance the implementation of sectoral programmes at the subnational level; $50,000 for the advocacy programme to further the efforts to empower communities, families and individuals with the knowledge and information necessary for them to participate in the process of development and social change; and $85,004 for the child protection programme to support NGOs in expanding services, particularly for street children.

United Nations

Economic and Social Council

E/ICEF/2000/P/L.47

Distr: Limited
21 July 2000

Original: English

United Nations Children's Fund
Executive Board
Second regular session
4-8 September 2000
Item 6 of the provisional agenda*

Recommendations to the Executive Board

Extension of cooperation with Rotary International for polio eradication and extension of the Vaccine Independence Initiative

Summary

The Executive Director recommends that the Executive Board approve the following:

(a) A five-year extension of the programme of cooperation with the EradiPolio programme of Rotary International for the period 2001 to 2005, in accordance with the terms of the original Board document (E/ICEF/1998/P/L.25), and in pursuit of the mission of the other resource programmes already offered by the availability of specific-purpose contributions from Rotary International;

(b) A five-year extension of the Vaccine Independence Initiative for the period 2001 to 2005, in accordance with the terms of the original Board document (E/ICEF/1991/P/L.41).

* E/ICEF/2000/14

00-54875 (E) 180800

I. Extension of cooperation with Rotary International for polio eradication

1. In 1996, the Executive Board approved a five-year extension of cooperation with the PolioPlus programme of Rotary International (E/ICEF/1996/P/L.62) to provide support to national immunization programmes for polio eradication activities globally (E/ICEF/1996/12/Rev.1, decision 1996/17). Since the inception of this programme, Rotary International has provided nearly $200 million to UNICEF for polio eradication efforts in over 70 countries, and has been one of the most important donors in supporting routine and supplemental vaccine needs.

2. Since 1988, the number of polio cases annually has decreased from an estimated 350,000 to just over 7,000 in 1999. Rotary International has indicated its long-standing and close working relationship with UNICEF, and expects to contribute $20 million to UNICEF from 2001 to 2005 for the purchase of oral polio vaccines and operational costs.

3. The Executive Director recommends that the Executive Board approve a five-year extension of the programme of cooperation with the PolioPlus programme of Rotary International for the period 2001 to 2005, in accordance with the original Board document (E/ICEF/1996/P/L.35), and an increase of $20 million in funding from other resources, subject to the availability of specific-purpose contributions from Rotary International.

II. Extension of the Vaccine Independence Initiative

4. In 1996, the Executive Board approved a five-year extension of the Vaccine Independence Initiative (VII) (E/ICEF/1996/P/L.62 and E/ICEF/1996/12/Rev.1, decision 1996/7). VII is an interregional programme, which created and capitalized a revolving fund to enhance the ability of developing countries to procure, with their own currencies, high-quality, low-cost vaccines in quantities adequate to reach and sustain universal child immunization and the disease control goals of the decade. The original programme was approved for the period 1991-1995 in the amount of $10 million in other resources. The Executive Board approved the extension in accordance with the terms of the original Board document (E/ICEF/1990/P/L.35).

5. To date, 31 countries (19 plus the 12 Pacific Island countries) have agreements through VII for use of the revolving fund. An additional five countries have modified agreements for direct use of UNICEF procurement services. Six others, which were originally VII countries, are now financing vaccines and procuring directly on the international market.

6. The Executive Director recommends that the Executive Board approve a five-year extension of VII for the period 2001 to 2005, in accordance with the terms of the original Board document, with an increase in funding from other resources in the amount of $10 million so that participating countries will be able to expand the procurement of new vaccines and additional countries will be able to participate. VII will be used as one financing mechanism for countries within the overall framework of the Global Alliance for Vaccines and Immunization (GAVI).